	_		** PUBLIC DISCLOSURE CON Return of Organization Exempt F		ncome Tax	OMB No. 1545-0047	
Form 990			Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)				
		of the Treasury	Do not enter social security numbers on this form as	-	•	Open to Public	
Inter	nal Rev	enue Service	Go to www.irs.gov/Form990 for instructions and th			Inspection	
	For th			ل ending	UN 30, 2023		
	Check if applicat	ole:	organization		D Employer identific	ation number	
	Addr	ge WĔĹĹ	ESLEY COLLEGE				
	Nam Chan	ge Doing b	usiness as		04-210363	57	
Ļ	retur	n Number		Room/suite	E Telephone number	000	
	retur termi		CENTRAL STREET		781-283-1		
	ated Ame	City or t	own, state or province, country, and ZIP or foreign postal code ESLEY, MA 02481-8203		G Gross receipts \$	459,469,216.	
	retur Appl		nd address of principal officer: PAULA A. JOHNSON		H(a) Is this a group read for subordinates?		
	tion pend		AS C ABOVE		H(b) Are all subordinates in		
1	Tay.e		$\overline{\mathbf{X}}$ 501(c)(3) \Box 501(c)() (insert no.) \Box 4947(a)(1) of	r 527	1	ist. See instructions	
	Webs		WELLESLEY.EDU		H(c) Group exemption		
		f organization:		I Year		State of legal domicile: MA	
	art I	Summary				olato or logal dollator	
	1	Briefly describ	e the organization's mission or most significant activities: $\underline{ extsf{TO}}$ PR	OVIDE	AN EXCELLEN	T LIBERAL	
ac		ARTS ED	UCATION FOR WOMEN WHO WILL MAKE A I	DIFFER	ENCE IN THE	WORLD.	
Governance	2	Check this bo	x if the organization discontinued its operations or dispose	ed of more	than 25% of its net asse	ets.	
INC	3	Number of vot	34				
		Number of ind		33			
es é	5	Total number	of individuals employed in calendar year 2022 (Part V, line 2a)			2946	
viti	6	Total number	of volunteers (estimate if necessary)		0		
Activities &	7 a		al unrelated business revenue from Part VIII, column (C), line 12			1,544,315.	
_	b	Net unrelated	business taxable income from Form 990-T, Part I, line 11	<u></u>		1,151,175.	
					Prior Year	Current Year	
en	8		and grants (Part VIII, line 1h)	1	60,807,794.	45,718,423.	
Revenue	9	•	ce revenue (Part VIII, line 2g)	<u> </u>	84,443,403. 18,304,861.	<u>187,033,270.</u> 141,015,186.	
Be	10		come (Part VIII, column (A), lines 3, 4, and 7d)		11,284,572.	11,802,952.	
	11		(Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)		74,840,630.	385,569,831.	
	13		 add lines 8 through 11 (must equal Part VIII, column (A), line 12) nilar amounts paid (Part IX, column (A), lines 1-3) 		79,352,912.	76,983,234.	
	14		to or for members (Part IX, column (A), line 4)		0.	0.	
	40	Salarias atho	componentian amployee banefits (Part IX column (A) lines 5.10)	1	50,293,912.	145,369,352.	
ses	16a	Professional fi	undraising fees (Part IX, column (A), line 11e)		0.	0.	
Expenses	b	Total fundraisi	undraising fees (Part IX, column (A), line 11e) ng expenses (Part IX, column (D), line 25) 7,501,84	4.	-		
Ě	17	Other expense	es (Part IX, column (A), lines 11a-11d, 11f-24e)		17,545,198.	118,378,418.	
	18		s. Add lines 13-17 (must equal Part IX, column (A), line 25)	-	47,192,022.	340,731,004.	
	19		expenses. Subtract line 18 from line 12	1	27,648,608.	44,838,827.	
Assets or	£			Be	ginning of Current Year	End of Year	
sets	20	Total assets (F	Part X, line 16)		3730562132.	3757832303.	
tAs	21		(Part X, line 26)		29,282,773.	610,133,786.	
Net			fund balances. Subtract line 21 from line 20		3101279359.	3147698517.	
	art II						
	-		I declare that I have examined this return, including accompanying schedules			knowledge and belief, it is	
true	e, corre	ct, and complete.	Declaration of preparer (other than officer) is based on all information of whi	ch preparer	has any knowledge.		

Sign	Signature of officer			Date					
Here	PIPER ORTON, VP FOR FIN. 8	& ADMIN. & TREAS							
	Type or print name and title								
	Print/Type preparer's name	Preparer's signature	Date						
Paid	SHYAMALEE JOSEPH			self-employed P01085371					
Preparer	Firm's name KPMG LLP			Firm's EIN 13-5565207					
Use Only	Firm's address 60 SOUTH STREET,	TWO FINANCIAL CENTER							
	BOSTON, MA 02111			Phone no. 617 – 988 – 1000					
May the IF	May the IRS discuss this return with the preparer shown above? See instructions								
				222					

232001 12-13-22 LHA For Paperwork Reduction Act Notice, see the separate instructions.

Form 990 (2022)

(Rev. January 2022)

Application for Automatic Extension of Time To File an Exempt Organization Return

Department of the Treasury Internal Revenue Service

Elle	wata awaliaatiaw	. fou o o la ustrum
File a sepa	rate application	n for each return.

► Go to www.irs.gov/Form8868 for the latest information.

Electronic filing (e-file). You can electronically file Form 8868 to request a 6-month automatic extension of time to file any of the forms listed below with the exception of Form 8870, Information Return for Transfers Associated With Certain Personal Benefit Contracts, for which an extension request must be sent to the IRS in paper format (see instructions). For more details on the electronic filing of this form, visit *www.irs.gov/e-file-providers/e-file-for-charities-and-non-profits.*

Automatic 6-Month Extension of Time. Only submit original (no copies needed).

All corporations required to file an income tax return other than Form 990-T (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to request an extension of time to file income tax returns.

Type of	r Name of exempt organization or other filer, see instru	Taxpayer identification number (TIN)					
print	WELLESLEY COLLEGE					03637	
File by the due date f filing your	Number, street, and room or suite no. If a P.O. box, s	ee instruct	ions.		-		
City, town or post office, state, and ZIP code. For a foreign address, see instructions. WELLESLEY, MA 02481-8203							
Enter th	he Return Code for the return that this application is for (file	e a separa	te application for each return)			01	
Applica	ation	Return	Application			Return	
ls For		Code	Is For			Code	
Form 9	90 or Form 990-EZ	01	Form 1041-A			08	
Form 4	720 (individual)	03	Form 4720 (other than individual)			09	
Form 99	90-PF	04	Form 5227			10	
Form 99	90-T (sec. 401(a) or 408(a) trust)	05	Form 6069			11	
Form 99	90-T (trust other than above)	06	Form 8870			12	
Form 9	90-T (corporation) PIPER ORTON	07					
 If thi box 1 the state of the stat	e organization does not have an office or place of business s is for a Group Return, enter the organization's four digit 	Group Exe and atta MAX anization's , an	mption Number (GEN) I uch a list with the names and TINs of <u>X 15, 2024</u> , to file return for: Id ending JUN 30, 2023	f this is fo all memb	r the whole of ers the exter opt organizat	group, check this	
	this application is for Forms 990-PF, 990-T, 4720, or 6069 ny nonrefundable credits. See instructions.), enter the	tentative tax, less	3a	\$	0.	
b lf	this application is for Forms 990-PF, 990-T, 4720, or 6069 stimated tax payments made. Include any prior year overp			3b	\$	0.	
 Balance due. Subtract line 3b from line 3a. Include your part 							
	sing EFTPS (Electronic Federal Tax Payment System). See	•	· · · ·	3c	\$	0.	
	n: If you are going to make an electronic funds withdrawal					-TE for payment	
LHA	For Privacy Act and Paperwork Reduction Act Notice,	see instru	ictions.		Form 8	3868 (Rev. 1-2022)	

Form	990 (2022) WELLESLEY COLLEGE	04-2103637	Page 2
Pa	t III Statement of Program Service Accomplishments		
	Check if Schedule O contains a response or note to any line in this Part III	<u></u>	
1	Briefly describe the organization's mission: TO PROVIDE AN EXCELLENT LIBERAL ARTS EDUCATION FOR WOMEN	WHO WITL MAI	ΥE
	A DIFFERENCE IN THE WORLD.		
2	Did the organization undertake any significant program services during the year which were not listed on the	—	v
	prior Form 990 or 990-EZ?	Yes	LA No
3	If "Yes," describe these new services on Schedule O. Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes	XNo
5	If "Yes," describe these changes on Schedule O.		
4	Describe the organization's program service accomplishments for each of its three largest program services, as r	measured by expenses.	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other		nd
	revenue, if any, for each program service reported.	104 500	
4a	(Code:) (Expenses \$ 175,559,272. including grants of \$ 0.) (Revenue of the construction of the cons		
	OUTSTANDING EDUCATION: WELLESLEY COLLEGE IS COMMITTED TO OUR EXCELLENT LIBERAL ARTS CURRICULUM IS BOTH INTELLECTUR		Α·Τ.
	CULTURALLY BROAD TO PREPARE OUR GRADUATES FOR THEIR LIVES		
	COLLEGE. WELLESLEY OFFERS MORE THAN 50 DEPARTMENTAL AND	<u> </u>	
	INTERDEPARTMENTAL MAJORS TO APPROXIMATELY 2,300 STUDENTS	. THE AVERAGI	Ξ
	CLASS SIZE IS 17 TO 20 STUDENTS WITH A 7:1 STUDENT-FACULY	FY RATIO.	
4b	(Code:) (Expenses \$ 79,716,172. including grants of \$ 76,983,234.) (Revenue	ue \$	0.
	WELLESLEY COLLEGE HAS A LONG TRADITION OF NEED-BLIND ADM		
	CITIZENS AND PERMANENT RESIDENTS, MAKING ADMISSION DECIS		
	REGARD TO A FAMILY'S FINANCIAL SITUATION. THROUGH ITS FI		
	PROGRAM, THE COLLEGE MEETS 100 PERCENT OF A STUDENT'S DEI FINANCIAL NEED. RESOURCES DEDICATED TO THE FINANCIAL AID		יזס די
	THAT WELLESLEY IS SUCCESSFUL IN RECRUITING AND ENROLLING		
	DIVERSE STUDENT BODY WITH CONTINUED ATTENTION TO ISSUES (_
	AND AFFORDABILITY. APPROXIMATELY 60% OF THE STUDENT BODY		
	FINANCIAL AID AND WELLESLEY IS WIDELY RECOGNIZED AS ONE (
	COLLEGES IN THE COUNTRY FOR STUDENTS GRADUATING WITH THE	LEAST AMOUN	Г
	OF DEBT.		
4c	(Code:) (Expenses \$ 12,168,372. including grants of \$0. (Revenue	ue\$ 12,168,3	372
тс	SPONSORED RESEARCH: WELLESLEY PRIDES ITSELF ON ITS COMMI		
	SUPPORTING THE TEACHER-SCHOLAR IDEAL, ENABLING OUR GIFTED		
	MEMBERS TO INTEGRATE THEIR LOVE OF TEACHING AND WORKING (
	STUDENTS WITH THEIR PURSUIT OF THE ADVANCEMENT OF KNOWLE	DGE THROUGH	
	THEIR WORLD-CLASS RESEARCH.		
4d	Other program services (Describe on Schedule O.)		
	(Expenses \$ including grants of \$) (Revenue \$)	
4e	Total program service expenses267,443,816.	Lower Q	90 (2022)
222001	2 12-13-22	Form	(2022 <u>)</u>
52002	3		
) 05	09 153541 84190V 2022.05090 WELLESLEY COLL	EGE	84190

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 Form 990 (2022)
 WELLESLEY
 COLLEGE

 Part IV
 Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1	X	
2	Is the organization required to complete Schedule B, Schedule of Contributors? See instructions	2	Х	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3		_X_
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
_	during the tax year? If "Yes," complete Schedule C, Part II	4		<u>X</u>
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or	_		v
•	similar amounts as defined in Rev. Proc. 98-19? If "Yes," complete Schedule C, Part III	5		<u> </u>
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			v
-	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		<u>X</u>
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,	7		х
•	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete	8	х	
9	Schedule D, Part III Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for	_ o	<u></u>	
9	amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in donor-restricted endowments	9		- 23
10	or in quasi endowments? If "Yes," complete Schedule D, Part V	10	х	
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VII, VII, IX, or X,			
••	as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
u	Part VI	11a	х	
b	Did the organization report an amount for investments - other securities in Part X, line 12, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	Х	
с	Did the organization report an amount for investments - program related in Part X, line 13, that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		Х
d	Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		Х
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Х	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Х	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a	X	
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		<u> </u>
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13	X	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	X	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
4-	or more? If "Yes," complete Schedule F, Parts I and IV	14b	X	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			v
10	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		<u>X</u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	46	х	
17	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16	Δ	<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If</i> "Yes," <i>complete Schedule G, Part I.</i> See instructions	17		х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines			
10	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			
	complete Schedule G, Part III	19		х
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		X
	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		<u> </u>
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes." complete Schedule I, Parts I and II	21		х
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232003 12-13-22

2022.05090 WELLESLEY COLLEGE

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 Form 990 (2022)
 WELLESLEY
 COLLEGE

 Part IV
 Checklist of Required Schedules
 (continued)

			Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22	Х	
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete			
	Schedule J	23	Х	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete			
	Schedule K. If "No," go to line 25a	24a	Х	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		X
с	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		X
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		Х
	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		x
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes." complete			
	Schedule L. Part I	25b		x
26	Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current			
	or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35%			
	controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part II	26	х	
27	Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee,			
	creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled			
	entity (including an employee thereof) or family member of any of these persons? <i>If</i> "Yes," <i>complete Schedule L, Part III</i>	27		x
28	Was the organization a party to a business transaction with one of the following parties (see the Schedule L, Part IV,			
20	instructions for applicable filing thresholds, conditions, and exceptions):			
-	A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? If			
a		28a		x
h	"Yes," complete Schedule L, Part IV	28b		X
	A family member of any individual described in line 28a? <i>If</i> "Yes," <i>complete Schedule L, Part IV</i>	200		- 23
C		28c		x
00	"Yes," complete Schedule L, Part IV	200	Х	- 23
29 20	Did the organization receive more than \$25,000 in non-cash contributions? <i>If</i> "Yes," <i>complete Schedule M</i>		<u></u>	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	0	х	
~ 1	contributions? If "Yes," complete Schedule M	30		x
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			v
	Schedule N, Part II	32		X X
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations		37	
	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33	Х	
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	Х	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36		X X
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		X
38	Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19?			
	Note: All Form 990 filers are required to complete Schedule O	38	Х	
Pa				
	Check if Schedule O contains a response or note to any line in this Part V			
			Yes	No
1a	Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable 1a 496			
b	Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable 1b 0			
с	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming			
	(gambling) winnings to prize winners?	1c	Х	
232004	12-13-22	Form	990	(2022)
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Form	990 (2022) WELLESLEY COLLEGE		04-2103	637	P	age 5
Par	t V Statements Regarding Other IRS Filings and Tax Compliance (continued)					
					Yes	No
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,					
	filed for the calendar year ending with or within the year covered by this return	2a	2946			
b	If at least one is reported on line 2a, did the organization file all required federal employment tax retur	ms?		2b	Х	
3a	Did the organization have unrelated business gross income of \$1,000 or more during the year?			3a	Х	
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule	Ο.		3b	Х	
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other	author	ity over, a			
	financial account in a foreign country (such as a bank account, securities account, or other financial a	accoui	nt)?	4a	Х	
b	If "Yes," enter the name of the foreign country FRANCE					
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial A	ccour	ts (FBAR).			
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?			5a		X X
b	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?					
с	c If "Yes" to line 5a or 5b, did the organization file Form 8886-T?					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the	ne orga	anization solicit			
	any contributions that were not tax deductible as charitable contributions?			6a		X
b	If "Yes," did the organization include with every solicitation an express statement that such contribut	ions o	r gifts			
	were not tax deductible?			6b		
7	Organizations that may receive deductible contributions under section 170(c).					
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and se	rvices	provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it w	as req	uired			
	to file Form 8282?			7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year	7d				
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit c	ontrac	t?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contr	act?		7f		X
g	g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?					
h	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?					
8	8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the					
	sponsoring organization have excess business holdings at any time during the year?					
9	Sponsoring organizations maintaining donor advised funds.					
а				9a		
b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?			9b		
10	Section 501(c)(7) organizations. Enter:		1			
а	Initiation fees and capital contributions included on Part VIII, line 12	10a				
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10b				
11	Section 501(c)(12) organizations. Enter:	1	1			
	Gross income from members or shareholders	<u>11a</u>				
b	Gross income from other sources. (Do not net amounts due or paid to other sources against					
	amounts due or received from them.)	11b				
	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form		?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	12b	I			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.					
а	Is the organization licensed to issue qualified health plans in more than one state?			13a		
	Note: See the instructions for additional information the organization must report on Schedule O.					
a	Enter the amount of reserves the organization is required to maintain by the states in which the	400	1			
	organization is licensed to issue qualified health plans	13b				
	Enter the amount of reserves on hand	13c	•	44-		X
14a				14a		
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedules the provide an explanation on Schedules the provide an explanation of the provide			14b		<u> </u>
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remune			45	х	
	excess parachute payment(s) during the year?			15	Λ	
16	If "Yes," see the instructions and file Form 4720, Schedule N.	tince	mo?	46	х	
16	Is the organization an educational institution subject to the section 4968 excise tax on net investmen	L IFICOI	ne?	16	Δ	
47	If "Yes," complete Form 4720, Schedule O.					
17	Section 501(c)(21) organizations. Did the trust, or any disqualified or other person engage in any action that would result in the imposition of an average tax under section 4951, 4952 or 49532			47		
	that would result in the imposition of an excise tax under section 4951, 4952 or 4953?			17		
000005	If "Yes," complete Form 6069.			Form	990	(2022)
232005	12-13-22			TUTT		(2022)

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905	09 153541 84190V 2022.05090 WELLESLEY COLLEGE		84	190
232006	5 12-13-22 7	Form	9 90	(2022
	106 CENTRAL STREET, WELLESLEY, MA 02481	Г	000	/0000
	PIPER ORTON - 781-283-1000			
20	State the name, address, and telephone number of the person who possesses the organization's books and records			
	statements available to the public during the tax year.			
19	Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	cial	
	X Own website X Another's website X Upon request Other (explain on Schedule O)			
10	for public inspection. Indicate how you made these available. Check all that apply.	orny)	avalidi	
17 18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3):	only	availal	hle
17	List the states with which a copy of this Form 990 is required to be filed			
Sec	tion C. Disclosure		1	
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b		
b				
h	taxable entity during the year? If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation	16a		Λ
108	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	160		х
16-	If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.			
b	Other officers or key employees of the organization	15b	^	
	The organization's CEO, Executive Director, or top management official	15a	X X	
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	45	v	
15	Did the process for determining compensation of the following persons include a review and approval by independent			
14	Did the organization have a written document retention and destruction policy?	14	X	
13	Did the organization have a written whistleblower policy?	13	X	
	on Schedule O how this was done	12c	X	
с	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	Х	
	Describe on Schedule O the process, if any, used by the organization to review this Form 990.			
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		Х
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			
10a	Did the organization have local chapters, branches, or affiliates?	10a		Х
			Yes	No
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)	<u> </u>	1	~~
3	organization's mailing address? If "Yes," provide the names and addresses on Schedule O	9		х
ы 9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			
	The governing body? Each committee with authority to act on behalf of the governing body?	oa 8b	X	
8 a		8a	х	
0	persons other than the governing body? Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	7b		X
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or			v
	more members of the governing body?	7a		X
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or			
6	Did the organization have members or stockholders?	6		Х
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х
	of officers, directors, trustees, or key employees to a management company or other person?	3		Х
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision			
-	officer, director, trustee, or key employee?	2		Х
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other			
h	Enter the number of voting members included on line 1a, above, who are independent 1b 33			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule 0.			

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response

to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.

04-2103637

34

1a

Page 6

X

Yes No

WELLESLEY COLLEGE

Check if Schedule O contains a response or note to any line in this Part VI

1a Enter the number of voting members of the governing body at the end of the tax year

Section A. Governing Body and Management

Form 990 (2022)

Form 990 (2022)	WELLESLEY COLLEGE	04-2103637	Page 7
Part VII Cor	mpensation of Officers, Directors, Trustees, Key Employees, High	est Compensated	
Em	ployees, and Independent Contractors		
Chec	ck if Schedule O contains a response or note to any line in this Part VII		
Section A. Offi	ficers, Directors, Trustees, Key Employees, and Highest Compensated Employees		
1a Complete this	is table for all persons required to be listed. Report compensation for the calendar year	ending with or within the organization's	tax year.

• List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.

• List all of the organization's current key employees, if any. See the instructions for definition of "key employee."

• List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.

• List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.

• List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A)	(B)	(C)		(D) (E)		(F)				
Name and title	Average	(do	Position (do not check more than one		Reportable	Reportable	Estimated			
	hours per	box	, unles	ss per	son i	s both	an	compensation	compensation	amount of
	week	-	cer an	aaa	recio	r/trus	.ee)	from	from related	other
	(list any	recto						the	organizations	compensation
	hours for related	e or d	tee			sated		organization (W-2/1099-MISC/	(W-2/1099-MISC/ 1099-NEC)	from the organization
	organizations	ruster	l trus		/ee	npen		1099-NEC)	1033-NEO)	and related
	below	Individual trustee or director	Institutional trustee	-	mploy	st col	er	1000 1120)		organizations
	line)	Indivi	Institu	Officer	Key employee	Highest compensated employee	Former			5
(1) DEBORAH F. KUENSTNER	60.00									
CHIEF INVESTMENT OFFICER	0.00			Х				1,184,564.	0.	61,327.
(2) ROSE C. CARPENTER	60.00									
MANAGING DIRECTOR TO DEPUTY CIO	0.00					X		988,495.	0.	59,834.
(3) RAY OQUENDO	60.00									
CHIEF OPERATING OFFICER	0.00					X		921,837.	0.	60,699.
(4) PAULA A. JOHNSON	60.00									
PRESIDENT	0.00	Х		Х				730,275.	0.	152,996.
(5) GREG ROZOLSKY	60.00									
INVESTMENT DIRECTOR	0.00					X		643,577.	0.	44,021.
(6) MATTHEW VEILLEUX	60.00									
INVESTMENT DIRECTOR	0.00					X		544,287.	0.	40,320.
(7) ANDREW SHENNAN	60.00									
PROVOST AND DEAN OF COLLEGE	0.00			Х				373,066.	0.	131,053.
(8) PIPER ORTON	60.00									
VP FOR FIN. & ADMIN. & TREAS.	0.00			Х				407,876.	0.	42,625.
(9) KAREN PETRULAKIS	60.00									
GENERAL COUNSEL	0.00					X		385,185.	0.	60,437.
(10) SHEILAH HORTON	60.00									
DEAN OF STUDENTS	0.00				X			276,254.	0.	119,628.
(11) MARY CASEY	60.00									
VP FOR DEVELOPMENT & PUB. AFF.	0.00			Х				302,935.	0.	20,387.
(12) MEGAN NUNEZ	60.00								0	40 499
DEAN OF FACULTY AFFAIRS	0.00				X			240,743.	0.	48,477.
(13) MICHAEL JEFFRIES	60.00							000 401	0	
DEAN OF ACADEMIC AFF.	0.00				X			232,491.	0.	46,065.
(14) ANN VELENCHIK	60.00						v	202 140	0	44 070
FORMER DEAN OF ACADEMIC AFF.	0.00						Х	203,140.	0.	44,270.
(15) JOY ST. JOHN	60.00						v	127,552.	0.	26,058.
DEAN-ADMISS. & STU. FIN. SVCS (16) DEBORA DE HOYOS							Х	127,552.	0.	20,050.
CHAIR	12.00	v						0.	0.	
(17) CHRISTOPHER T. PASKO	10.00	^						0.	0.	0.
VICE CHAIR	0.00	x						0.	0.	0.
	0.00	-73						0.	0.	Form 990 (2022)
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Form	990	(2022)
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WELLESLEY COLLEGE

Part VII Section A. Officers, Directors, Trus	tees, Key Emp	oloy	ees,	and	l Hig	ghes	st C	ompensated Employee	s (continued)	
(A)	(B)			(0	C)			(D)	(E)	(F)
Name and title	Average			Pos	ition			Reportable	Reportable	Estimated
	hours per		not ch , unles					compensation	compensation	amount of
	week		cer an					from	from related	other
	(list any	ctor						the	organizations	compensation
	hours for	direc				D.		organization	(W-2/1099-MISC/	from the
	related	ee or	stee			nsate		(W-2/1099-MISC/	1099-NEC)	organization
	organizations	trust	al tru		yee	ampe		1099-NEC)	,	and related
	below	ndividual trustee or director	nstitutional trustee	ar	ƙey employee	Highest compensated employee	er			organizations
	line)	Indiv	Instit	Officer	Key e	High empl	Former			
(18) TODD ABBRECHT	2.00									
TRUSTEE	0.00	Х						0.	0.	0.
(19) MARTHA GOLDBERG ARONSON	2.00									
TRUSTEE	0.00	х						0.	0.	0.
(20) DOLORES L. ARREDONDO	2.00									
TRUSTEE	0.00	х						0.	0.	0.
(21) M. AMY BATCHELOR	2.00									
TRUSTEE	0.00	х						0.	0.	0.
(22) BRIAN C. BRODERICK	2.00									
TRUSTEE	0.00	х						0.	0.	0.
(23) LAURA WOOD CANTOPHER	2.00	Δ						0.	0.	0.
TRUSTEE	0.00	х						0.	0.	0.
(24) ANNE SHEN CHAO	2.00	~	$\left \right $					0.	0.	0.
	0.00	х						0.	0.	0
TRUSTEE	2.00	Λ						0.	0.	0.
(25) ELYSE CHERRY								0	0	
TRUSTEE	0.00	Х						0.	0.	0.
(26) CALLIE CROSSLEY	2.00								•	
TRUSTEE	0.00	Х						0.	0.	0.
1b Subtotal								7,562,277.	0.	958,197.
c Total from continuation sheets to Part VI	I, Section A							0.	0.	0.
d Total (add lines 1b and 1c)								7,562,277.	0.	958,197.
2 Total number of individuals (including but n	ot limited to th	ose	listed	d ab	ove) wh	o re	eceived more than \$100,	000 of reportable	
compensation from the organization										285
										Yes No
3 Did the organization list any former officer,	director, truste	ee, k	kev e	mpl	ove	e, or	hig	hest compensated empl	oyee on	
line 1a? If "Yes," complete Schedule J for s										3 X
4 For any individual listed on line 1a, is the su										
and related organizations greater than \$150										4 X
5 Did any person listed on line 1a receive or a										4 11
	-				-			ed organization of individ	iual IUI services	5 X
rendered to the organization? <i>If "Yes," com</i> Section B. Independent Contractors	plete Schedule	<u>e J f</u>	or su	<u>ch r</u>	bers	on .				5 1
								· · · · · · · · · · · · · · · · · · ·	100.000 - (
1 Complete this table for your five highest co	-	-								ation from
the organization. Report compensation for	ine calendar ye	ear e	enain	g w	ith c	or wi	<u>tnin</u>		ear.	(0)
(A) Name and business	addross							(B) Description of s	onvicos	(C) Compensation
								Description of s		Jompensation
ELAINE CONSTRUCTION COMPANY										
90 WELLS AVE, NEWTON, MA							_	CONSTRUCTION	/	,425,437.
TURNER CONSTRUCTION COMPA	•		POI	КТ						
LANE - 2ND FLOOR, BOSTON,	MA 022	10						CONSTRUCTION	6	,303,439.
AMERESCO, INC									_	
P.O. BOX 419135, BOSTON,		1					_	ENGINEERING S	SERVICES 5	,023,984.
WALSH BROTHERS INCORPORAT					_					
210 COMMERCIAL STREET, BC								CONSTRUCTION	4	,352,545.
FISCHBACH AND MOORE ELECT				LL(С					
60 TENEAN STREET, BOSTON, MA 02122ELECTRICIAN3,623,958							,623,958.			
2 Total number of independent contractors (in	ncluding but no	ot lin	nited	l to 1	thos	se lis	ted	above) who received mo	ore than	
\$100,000 of a second line from the second				1	21					

Form 990 (2022)

Part VII Section A. Officers, Directors, T	rustees, Key Er	mployees, and Highest Compensated E						Compensated Employe	ployees (continued)			
(A)	(B)			(C				(D)	(E)	(F)		
Name and title	Average			Posi				Reportable	Reportable	Estimated		
	hours	(C	heck	all t	hat	app	ly)	compensation	compensation	amount of		
	per week					a		from the	from related organizations	other compensation		
	(list any	tor				plo ye		organization	(W-2/1099-MISC)	from the		
	hours for	direc				ed em		(W-2/1099-MISC)	(11 2/1000 11100)	organization		
	related	tee or	istee			ensate		(and related		
	organizations	l trus	nal tri		oyee	ompe				organizations		
	below	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pen sated em ployee	Former					
	line)	Ind	Inst	Offi	Key	Hig	For					
(27) OPHELIA DAHL	2.00											
TRUSTEE	0.00	Х						0.	0.	0		
(28) ELIZABETH DESMOND	2.00											
TRUSTEE	0.00	Х						0.	0.	0		
(29) SUZANNE FREY	2.00											
TRUSTEE	0.00	Х						0.	0.	0		
(30) BETH C. FRIEDMAN	2.00								_	-		
TRUSTEE	0.00	Х						0.	0.	0		
(31) SARAH JANE GUNTER	2.00											
TRUSTEE	0.00	Х						0.	0.	0		
(32) CHERYL HAYWOOD	2.00								0			
	0.00	Х						0.	0.	0		
(33) MAIA HEYMANN	2.00								0			
	0.00	Х						0.	0.	0		
(34) DOUGLAS W. HOLLETT	2.00								0			
TRUSTEE	0.00	Х						0.	0.	0		
(35) SANDRA HORBACH	2.00								0			
TRUSTEE	0.00	Х						0.	0.	0		
(36) VIVIAN KAO	2.00	77						0	0			
TRUSTEE	0.00	Х						0.	0.	0		
(37) SUSAN SALTZBART KILSBY	2.00	77						0	0			
TRUSTEE (38) PATRICK LEE	0.00	Х						0.	0.	0		
,	2.00	v						0	0			
	0.00	Х						0.	0.	0		
(39) SUSAN KOENIGSBERG LUCAS	2.00	77						0	0			
TRUSTEE	0.00	Х						0.	0.	0		
(40) ELIZABETH F. MCCORMACK	2.00	v						0	0			
TRUSTEE	0.00	Х						0.	0.	0		
(41) TATIANA IVY MOISE TRUSTEE	2.00	v						0	0.			
(42) PAULINA PONCE DE LEON BARIDO	0.00	Х						0.	0.	0		
(42) PAULINA PONCE DE LEON BARIDO	2.00	v						0	0.			
	0.00	Х						0.	0.	0		
(43) LIA GELIN POORVU TRUSTEE	2.00	v						0.	0.			
	0.00	Х						0.	0.	0		
44) SOPHIA SHAW PRUSTEE	2.00	x						0.	0.			
	2.00	^						U •	U •	0		
(45) JENNIFER M. SMITH TRUSTEE	0.00	x						0.	0.	0		
		^						0.	U •			
(46) GRACE Y. TOH	2.00	x						0.	0.	0		
RUSTEE	0.00	Ā						U•	υ.	<u>_</u>		

Form 990 WELLESLEY				04-2103637									
Part VII Section A. Officers, Directors, Tru	istees, Key En	nplo	yee	s, a	nd H	ligh	est (Compensated Employees (continued)					
(A)	(B)				C)			(D)	(F)				
Name and title	Average				ition	1		Reportable	(E) Reportable	Estimated			
	hours	(c)	(check all that apply)				Iv)	compensation	compensation	amount of			
	per	(0)					, (V	from	from related	other			
	week					e.		the	organizations	compensation			
	(list any	or				oloye		organization	(W-2/1099-MISC)	from the			
	hours for	lirect				l em		(W-2/1099-MISC)	(00-2/1033-10130)	organization			
	related	e or (tee			sated		(00-2/1033-10130)		and related			
	organizations	uster	trus		ee	uben				organizations			
	below	ual tr	tiona		lploy	tcor	~			organizations			
	line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest com pensated em ployee	Former						
	-	-	드	ö	ž	Ξ	Fo						
(47) PETER TUFANO TRUSTEE	2.00	x						0.	0.	0.			
(48) SUE WAGNER	2.00							0.	0.	0.			
TRUSTEE	0.00	х						0.	0.	0.			
	0.00							``		Ŭ .			
		1											
		<u> </u>											
		•											
-					-	-							
Total to Part VII, Section A, line 1c	<u></u>	<u></u> .	<u></u> .		<u></u> .	<u></u> .							

232201 04-01-22

			Check if Schedule O	cont	ains a re	sponse	or note to any line	e in this Part VIII			
				00111		500100		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512 - 514
ts ts	1	a	Federated campaigns		1	a					
Contributions, Gifts, Grants and Other Similar Amounts		b	Membership dues		1	b					
کو م		с	Fundraising events		1	с					
ar /		d	Related organizations		1	d					
s, Dil		е	Government grants (contr	ributi	ions) 1	e	5,923,232.				
rion		f	All other contributions, gifts,	grant	ts, and						
the			similar amounts not included	d abov	ve 1	f	39,795,191.				
oft.		g	Noncash contributions included in	lines 1	1a-1f 1	g \$	1,750,000.				
<u>8</u>		h	Total. Add lines 1a-1f					45,718,423.			
							Business Code				
9	2	2 a	STUDENT TUITION AND		ES		900099	144482496.	144482496.		
ervi		b	STUDENT ROOM AND BO	ARD			900099	41,149,515.	41149515.		
s Se		С	WELLESLEY CENTER FOR	R WC	OMEN		900099	1,401,259.	1,401,259.		
ev an		d									
Program Service Revenue		е									
ā		f	All other program service	reve	nue						
		g	Total. Add lines 2a-2f					187033270.			
	3	3	Investment income (inclue	ding	dividend	s, inter	est, and				
								21,372,571.		-3104185.	24476756
	4	ŀ	Income from investment of	of tax	k-exempt	bond p	proceeds				
	5	5	Royalties								
					(i) F	leal	(ii) Personal				
	6		Gross rents	6a							
			Less: rental expenses	6b							
			Rental income or (loss)	6c							
			Net rental income or (loss	s) <u></u>			(1) Others				
	7	′а	Gross amount from sales of		(i) Sec		(ii) Other				
			assets other than inventory	7a	193,54	2,000.					
•		b	Less: cost or other basis		72 00						
nu			and sales expenses		73,89						
Revenue			Gain or (loss)	-	119,64		-	119642615.		2579798.	11706281
er B			Net gain or (loss)				1	119042015.		2575758.	11/00201
÷	8	ба	Gross income from fundraisi	-	-						
δ			including \$								
			contributions reported on		,						
		h	Part IV, line 18 Less: direct expenses								
			Net income or (loss) from			···· 🖵	,			-	
	6		Gross income from gamir								
		<i>,</i> u	Part IV, line 19	-							
		h	Less: direct expenses								
			Net income or (loss) from			···· 🖵	,				
	10		Gross sales of inventory,								
			and allowances			10	a				
		b	Less: cost of goods sold								
			Net income or (loss) from								
				24100			Business Code				
sno	11	a	AUXILIARY ENTERPRIS	ES			900099	3,739,264.	3,739,264.		
Miscellaneous Revenue		b	NEHOIDEN GOLF CLUB				713990	2,068,702.		2068702.	
ella ver		č						. ,			
S. S.			All other revenue				900099	5,994,986.	5,994,986.		1
Σ			Total. Add lines 11a-11d					11,802,952.			
	12		Total revenue. See instruction					385569831.	196767520.	1544315.	14153957

232009 12-13-22

Form **990** (2022)

WELLESLEY COLLEGE

Form 990 (2022) WELLESL
Part VIII Statement of Revenue

Form 990 (2022)	WELLESLEY				04
Part IX Stateme	ent of Functional Expe	nses			
Section 501(c)(3) and 5	501(c)(4) organizations must co	omplete all colun	nns. All other organ	izations must compl	ete column (A).
Check	if Schedule O contains a res	nonse or note to	any line in this Pa	+ IX	

	Check if Schedule O contains a response or note to any line in this Part IX								
	not include amounts reported on lines 6b,	(A) Total expenses	(B) Program service	(C) Management and	(D) Fundraising				
	8b, 9b, and 10b of Part VIII.		expenses	general expenses	expenses				
1	Grants and other assistance to domestic organizations								
•	and domestic governments. See Part IV, line 21								
2	Grants and other assistance to domestic	70,439,518.	70,439,518.						
~	individuals. See Part IV, line 22	10,439,510.	10,439,510.						
3	Grants and other assistance to foreign organizations, foreign governments, and foreign								
	individuals. See Part IV, lines 15 and 16	6,543,716.	6,543,716.						
4	Benefits paid to or for members	0,515,710.	0,545,710.						
5	Compensation of current officers, directors,								
5	trustees, and key employees	3,806,607.	1,639,677.	2,069,300.	97,630.				
6	Compensation not included above to disqualified			2,003,0000					
Ŭ	persons (as defined under section 4958(f)(1)) and								
	persons described in section 4958(c)(3)(B)								
7	Other salaries and wages	107.290.067.	79,222,200.	23.726.744.	4,341,123.				
8	Pension plan accruals and contributions (include		,,						
-	section 401(k) and 403(b) employer contributions)	9,400,706.	7,648,860.	1,455,973.	295,873.				
9	Other employee benefits	17,448,981.		3,186,685.	465,991.				
10	Payroll taxes	7,422,991.	5,409,067.	1,765,963.	247,961.				
11	Fees for services (nonemployees):								
а	Management	6,410,793.	33,108.	6,374,911.	2,774.				
	Legal	802,500.	11,664.	790,836.					
	Accounting	452,068.		452,068.					
	Lobbying								
	Professional fundraising services. See Part IV, line 17								
f	Investment management fees	158,590.		158,590.					
g	Other. (If line 11g amount exceeds 10% of line 25,								
	column (A), amount, list line 11g expenses on Sch 0.)	15,837,901.	4,999,713.	10,319,530.	518,658.				
12	Advertising and promotion								
13	Office expenses	5,781,267.	3,563,355.	2,165,474.	52,438.				
14	Information technology	3,780,600.	3,389,583.	230,746.	160,271.				
15	Royalties	1,500.	1,500.						
16	Occupancy	5,666,540.	311,228.	5,352,726.	2,586.				
17	Travel	5,383,362.	3,365,354.	1,720,296.	297,712.				
18	Payments of travel or entertainment expenses								
	for any federal, state, or local public officials \dots		001 000	F0 00C	0 742				
19	Conferences, conventions, and meetings	285,412.	231,863.	50,806.	2,743.				
20	Interest	15,897,290.	15,897,290.						
21	Payments to affiliates	27,785,803.	24 470 025	2 751 420	551 110				
22	Depreciation, depletion, and amortization	3,109,588.	24,479,925. 3,109,588.	2,751,429.	554,449.				
23	Insurance	5,109,500.	5,109,500.						
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If								
	line 24e amount exceeds 10% of line 25, column (A),								
•	amount, list line 24e expenses on Schedule 0.) BANK FEES	12,744,911.	12,735,085.	8,143.	1,683.				
a b	STUDY AWAY EXPENSES	5,177,561.	5,177,561.	5,115.	1,003.				
c b	EQUIPMENT RENTAL	1,151,034.	571,505.	555,996.	23,533.				
d	PRINTING & MAILING	427,310.	181,598.	55,299.	190,413.				
	All other expenses	7,524,388.	4,684,553.	2,593,829.	246,006.				
25		340,731,004.		65,785,344.	7,501,844.				
26	Joint costs. Complete this line only if the organization		,, 		,,				
	reported in column (B) joint costs from a combined								
	educational campaign and fundraising solicitation.								
	Check here if following SOP 98-2 (ASC 958-720)								
232010) 12-13-22				Form 990 (2022)				
		13							

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WELLESLEY COLLEGE

		Check if Schedule O contains a response or note	e to an	/ line in this Part X			
					(A) Beginning of year		(B) End of year
	1	Cash - non-interest-bearing				1	
	2	Savings and temporary cash investments			214,155,406.	2	188,050,712.
	3	Pledges and grants receivable, net			41,161,987.	3	33,169,957.
	4	Accounts receivable, net			940,719.	4	743,064.
	5	Loans and other receivables from any current or	former	officer, director,			
		trustee, key employee, creator or founder, substa	antial c	ontributor, or 35%			
		controlled entity or family member of any of thes	e perso	ons	300,000.	5	300,000.
	6	Loans and other receivables from other disqualif	ied per	sons (as defined			
		under section 4958(f)(1)), and persons described	in sec	tion 4958(c)(3)(B)		6	
ts	7	Notes and loans receivable, net			5,933,630.	7	5,432,719.
Assets	8	Inventories for sale or use			473,045.	8	666,196.
Ä	9	Prepaid expenses and deferred charges			7,074,477.	9	5,507,745.
	10a	Land, buildings, and equipment: cost or other					
		basis. Complete Part VI of Schedule D	10a	984,687,456.			
	b	Less: accumulated depreciation		412,148,593.	550,111,141.	10c	
	11				964,243,000.	11	1088705000.
	12	Investments - other securities. See Part IV, line 1			1946168727.	12	1862718047.
	13	Investments - program-related. See Part IV, line 1	1			13	
	14	Intangible assets		14			
	15	Other assets. See Part IV, line 11		15			
	16	Total assets. Add lines 1 through 15 (must equa			3730562132.	16	3757832303.
	17	Accounts payable and accrued expenses			122,833,621.	17	113,797,443.
	18	Grants payable			1,193,748.	18	1,122,958.
	19	Deferred revenue			14,530,535.	19	13,325,224.
	20				225,618,046.	20	222,529,584.
	21	Escrow or custodial account liability. Complete F				21	
es	22	Loans and other payables to any current or form					
Liabilities		trustee, key employee, creator or founder, substa					
Liat		controlled entity or family member of any of thes			233,211,380.	22	230,979,561.
_	23	Secured mortgages and notes payable to unrelate			233,211,300.	23	<u>230,979,301.</u>
	24	Unsecured notes and loans payable to unrelated				24	
	25	Other liabilities (including federal income tax, pay parties, and other liabilities not included on lines					
		of Schedule D	17-24)		31,895,443.	25	28,379,016.
	26			629,282,773.	25 26	610,133,786.	
	20	Total liabilities. Add lines 17 through 25 Organizations that follow FASB ASC 958, chee		e X	025,202,115.	20	010,133,700.
Se		and complete lines 27, 28, 32, and 33.					
ů.	27				936,125,244.	27	957,066,000.
3ala	28				2165154115.	28	2190632517.
Б	20	Organizations that do not follow FASB ASC 95				20	
ΤuΓ			, 0110				
p	29					29	
ets							
Ass							
let ,	32				3101279359.		3147698517.
Z	33				3730562132.	33	3757832303.
Net Assets or Fund Balances		and complete lines 29 through 33. Capital stock or trust principal, or current funds Paid-in or capital surplus, or land, building, or eq Retained earnings, endowment, accumulated inc Total net assets or fund balances	3101279359. 3730562132.	29 30 31 32 33			

Form 990 (2022)

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Form 990 (2022) V Part X Balance Sheet

Form	990 (2022) WELLESLEY COLLEGE	04-	-21036	537	Pag	_{ge} 12
Pa	rt XI Reconciliation of Net Assets					
	Check if Schedule O contains a response or note to any line in this Part XI	<u></u>				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	385			
2	Total expenses (must equal Part IX, column (A), line 25)	2	340			
3	Revenue less expenses. Subtract line 2 from line 1	3		<u>,838</u>	<u> </u>	
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	3,101			
5	Net unrealized gains (losses) on investments	5	-8	,126	5,28	85.
6	Donated services and use of facilities	6				
7	Investment expenses	7				
8	Prior period adjustments	8				
9	Other changes in net assets or fund balances (explain on Schedule O)	9	9	,846	6,61	16.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32,					
	column (B))	10	3,147	,838	3,51	<u>17.</u>
Pa	rt XII Financial Statements and Reporting					
	Check if Schedule O contains a response or note to any line in this Part XII					ш
				_	Yes	No
1	Accounting method used to prepare the Form 990: Cash X Accrual Other					
	If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule	e O.				
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		·····	2a		X
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed	l on a				
	separate basis, consolidated basis, or both:					
	Separate basis Consolidated basis Both consolidated and separate basis					
b	Were the organization's financial statements audited by an independent accountant?		·····	2b	X	<u> </u>
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	e basis,				
	consolidated basis, or both:					
	X Separate basis Consolidated basis Both consolidated and separate basis					
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the					
	review, or compilation of its financial statements and selection of an independent accountant?			2c	X	<u> </u>
	If the organization changed either its oversight process or selection process during the tax year, explain on Sch	edule C).			
3a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the					
	Uniform Guidance, 2 C.F.R. Part 200, Subpart F?		ŀ	3a	X	<u> </u>
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the requi				.	
	or audits, explain why on Schedule O and describe any steps taken to undergo such audits			3b		L

Form **990** (2022)

Department of the Treasury Internal Revenue Service

(Form 990)

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section

4947(a)(1) nonexempt charitable trust. Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047
2022
Open to Public Inspection

Nam	e of t	he organization							identification number
D -			ESLEY COLLI						4-2103637
Par	tI	Reason for Public C	Charity Status.	(All organizations must o	omplete th	nis part.) S	ee instruction	S.	
The c	rgani	zation is not a private found	ation because it is: (F	For lines 1 through 12, c	heck only o	one box.)			
1		A church, convention of churches, or association of churches described in section 170(b)(1)(A)(i).							
2	X	A school described in secti	ion 170(b)(1)(A)(ii). (Attach Schedule E (Forn	ו 990).)				
3		A hospital or a cooperative	hospital service orga	nization described in se	ection 170	(b)(1)(A)(ii	i).		
4		A medical research organization	ation operated in cor	njunction with a hospital	described	in sectio	n 170(b)(1)(A	(iii). Enter	the hospital's name,
_		city, and state:							
5 [An organization operated for section 170(b)(1)(A)(iv). (C		lege or university owned	l or operat	ed by a go	vernmental u	nit describe	ed in
6		A federal, state, or local gov		ental unit described in	section 17	70(b)(1)(A)	(v)		
7	_	An organization that normal						ne neneral i	oublic described in
• •		section 170(b)(1)(A)(vi). (Co			onna gove			ie general j	
8		A community trust describe			них				
9		An agricultural research org				nd in coniu	nction with a	land grant	collogo
9 [or university or a non-land-g				-		-	-
		university:	frant college of agrici			name, orty		the conege	
10 [An organization that normal	Ily receives (1) more	than 33 1/3% of its supp	ort from c	ontributior	ns, membersh	ip fees, and	d gross receipts from
		activities related to its exem	npt functions, subjec	t to certain exceptions; a	and (2) no	more than	33 1/3% of its	s support f	rom gross investment
		income and unrelated busin	ness taxable income	(less section 511 tax) fro	m busines	ses acqui	red by the org	anization a	after June 30, 1975.
		See section 509(a)(2). (Cor	mplete Part III.)						
11 [An organization organized a	and operated exclusi	vely to test for public sa	fety. See	section 50)9(a)(4).		
12 [An organization organized a	and operated exclusi	vely for the benefit of, to	perform tl	he functio	ns of, or to ca	rry out the	purposes of one or
		more publicly supported org	ganizations describe	d in section 509(a)(1) o	r section	509(a)(2).	See section &	509(a)(3). (Check the box on
		lines 12a through 12d that of	describes the type of	f supporting organizatior	n and com	plete lines	12e, 12f, and	12g.	
а] Type I. A supporting orga	anization operated, s	upervised, or controlled	by its supp	ported org	anization(s), ty	pically by	giving
		the supported organization	on(s) the power to req	gularly appoint or elect a	majority o	of the direc	tors or trustee	es of the su	upporting
		organization. You must c	complete Part IV, Se	ctions A and B.					
b		Type II. A supporting orga	anization supervised	or controlled in connect	ion with its	s supporte	d organizatio	n(s), by hav	ving
		control or management o	f the supporting orga	anization vested in the sa	ame perso	ns that co	ntrol or mana	ge the supp	oorted
		organization(s). You mus	t complete Part IV,	Sections A and C.					
С		Type III functionally inte	grated. A supporting	g organization operated	in connect	tion with, a	and functional	ly integrate	ed with,
		its supported organizatior	n(s) (see instructions)	. You must complete I	Part IV, Se	ctions A,	D, and E.		
d		Type III non-functionally	integrated. A supp	orting organization oper	ated in cor	nnection w	ith its suppor	ted organiz	zation(s)
		that is not functionally inte	egrated. The organiz	ation generally must sat	isfy a distri	ibution rec	uirement and	an attentiv	/eness
		requirement (see instructi	ions). You must con	nplete Part IV, Sections	A and D,	and Part	V .		
е		Check this box if the orga	anization received a v	vritten determination fro	m the IRS	that it is a	Type I, Type	I, Type III	
		functionally integrated, or	Type III non-functior	nally integrated supporting	ng organiz	ation.			
f	Ente	r the number of supported o	organizations						
g		ide the following information			(iii) le the error	anization listed			
	(i	i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	in your governi Yes		(v) Amount of support (see ir		(vi) Amount of other support (see instructions)
Total									

Schedule	A (Form 990) 2022
Part II	Support Sc

WELLESLEY COLLEGE

04-2103637 Page 2

Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")	35590693.	86543194.	68183815.	60807794.	45718423.	296843919
2	Tax revenues levied for the organ-						
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	35590693.	86543194.	68183815.	60807794.	45718423.	296843919
5	The portion of total contributions						
	by each person (other than a						
	governmental unit or publicly						
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,						
	column (f)						15052666.
6	Public support. Subtract line 5 from line 4.						281791253
	tion B. Total Support						
	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	(f) Total
	Amounts from line 4		86543194.	68183815.	60807794.		
8	Gross income from interest,						
-	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	23975225.	19899290.	9992901.	14893756.	24476756.	93237928.
9	Net income from unrelated business						
Ŭ	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						
10	or loss from the sale of capital						
	assets (Explain in Part VI.)	11652667.	9372721.	5575733.	9371692.	9734250.	45707063.
11	Total support. Add lines 7 through 10		50/2/22		50720520		435788910
	Gross receipts from related activities,	etc (see instructio	ne)				,409,902.
	First 5 years. If the Form 990 is for th		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	fourth or fifth tax y	vear as a section 5	· · · · ·	,
10	organization, check this box and sto						
Sec	tion C. Computation of Public						
	Public support percentage for 2022 (-	column (f))		14	64.66 %
	Public support percentage from 2021					15	70.71 %
	33 1/3% support test - 2022. If the						
	stop here. The organization qualifies						37
b	33 1/3% support test - 2021. If the		-				
	and stop here. The organization qual						
17a	10% -facts-and-circumstances test						
	and if the organization meets the fact						
	meets the facts-and-circumstances te			-	-	vine organiz	
h	10% -facts-and-circumstances test	-	-		-		
	more, and if the organization meets th						
	organization meets the facts-and-circle						
18	Private foundation. If the organization						,
							(Form 990) 2022

Schedule A (Form 990) 2022

232022 12-09-22

Schedule A	Form	990) 202

WELLESLEY COLLEGE

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

See	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	include any "unusual grants.")						
2	Gross receipts from admissions, merchandise sold or services per- formed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose						
3	Gross receipts from activities that are not an unrelated trade or bus-						
	iness under section 513						
4	Tax revenues levied for the organ-						
	ization's benefit and either paid to or expended on its behalf						
5	The value of services or facilities furnished by a governmental unit to						
	the organization without charge \dots						
6	Total. Add lines 1 through 5						
7a	Amounts included on lines 1, 2, and 3 received from disqualified persons						
t	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
c	Add lines 7a and 7b						
	Public support. (Subtract line 7c from line 6.) ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2018	(b) 2019	(c) 2020	(d) 2021	(e) 2022	2 (f) Total
9	Amounts from line 6						
10a	Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources						
t	Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
	Add lines 10a and 10b						
	Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on						
12	Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13	Total support. (Add lines 9, 10c, 11, and 12.)						
	First 5 years. If the Form 990 is for the	ne organization's fi	rst, second, third,	fourth, or fifth tax	year as a section 5	501(c)(3) orga	nization,
	check this box and stop here						
See	ction C. Computation of Publ	ic Support Per	centage				
15	Public support percentage for 2022 (ine 8, column (f), d	livided by line 13,	column (f))		15	%
	Public support percentage from 2021					16	%
See	ction D. Computation of Inves	stment Income	e Percentage				
17	Investment income percentage for 20			line 13, column (f))		17	%
18						18	%
19 a	33 1/3% support tests - 2022. If the						line 17 is not
	more than 33 1/3%, check this box a	-	-				
k	33 1/3% support tests - 2021. If the						
•	line 18 is not more than 33 1/3%, che						
	Private foundation. If the organization	n did not check a	box on line 14, 19	a, or 19b, check t	nis box and see ins		
2320	23 12-09-22		18	3		Schee	dule A (Form 990) 2022

1

2

3a

Yes No

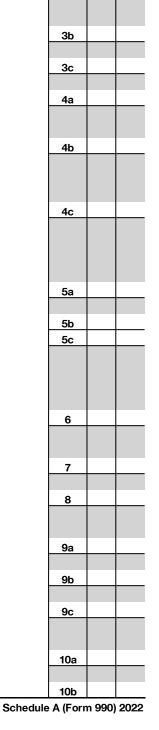
Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in **Part VI** how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in **Part VI** how the organization determined that the supported organization was described in section 509(a)(1) or (2).
- **3a** Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.
- **b** Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in **Part VI** when and how the organization made the determination.
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.
- **4a** Was any supported organization not organized in the United States ("foreign supported organization")? *If* "Yes," and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.
- **b** Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? *If* "Yes," *describe in* **Part VI** *how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.*
- **c** Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? *If* "Yes," *explain in* **Part VI** *what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.*
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).
- **b Type I or Type II only.** Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- 6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? *If "Yes," provide detail in* **Part VI.**
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? *If* "Yes." *complete Part I of Schedule L (Form 990).*
- **9a** Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in **Part VI.**
- **b** Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? *If* "Yes," *provide detail in* **Part VI.**
- c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- **10a** Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? *If* "Yes," *answer line 10b below.*
- **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)

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	(Form 990) 2022	WELLESLEY
Part IV	Supporting Or	ganizations (continued)

2

No

			Yes	No			
11	Has the organization accepted a gift or contribution from any of the following persons?						
а	A person who directly or indirectly controls, either alone or together with persons described on lines 11b and						
	11c below, the governing body of a supported organization?	11a					
b	A family member of a person described on line 11a above?	11b					
с	A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide						
	detail in Part VI.	11c					
Section B. Type I Supporting Organizations							
			Yes	No			

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1	Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? <i>If "No," describe in</i> Part VI <i>how the supported organization(s)</i> effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization is activities.				
	organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.	1			
2	Did the organization operate for the benefit of any supported organization other than the supported				
	organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in				

Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated,

supervised, or controlled the supporting organization. Section C. Type II Supporting Organizations

			Yes	
1	Were a majority of the organization's directors or trustees during the tax year also a majority of the directors			
	or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control			
	or management of the supporting organization was vested in the same persons that controlled or managed			
	the supported organization(s)	1		

Section D	. All Type	III Sup	porting	Organizations

			Yes	No
1	Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the			
	organization's governing documents in effect on the date of notification, to the extent not previously provided?	1		
2	Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s) or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how			
2	the organization maintained a close and continuous working relationship with the supported organization(s).	2		
3	By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? <i>If</i> "Yes," <i>describe in</i> Part VI <i>the role the organization</i> 's			
	supported organizations played in this regard	3		

Section E. Type III Functionally Integrated Supporting Organizations

1	Check the box next to the method that the organization used	to satisfy the Integral Part	Test during the year	r (see instructions).
-	Onech the box next to the method that the organization used	i to satisfy the integral i art	Tost during the yea	, (

- a The organization satisfied the Activities Test. Complete line 2 below.
- **b** The organization is the parent of each of its supported organizations. *Complete* **line 3** *below.*

с		The organization supported a governmental entity.	Describe in Part VI how you supported a governmental entity (see instruction <u>s).</u>	
---	--	---	--	--

- 2 Activities Test. Answer lines 2a and 2b below.
- a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in **Part VI identify those supported organizations and explain** how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.
- b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.
- 3 Parent of Supported Organizations. Answer lines 3a and 3b below.

a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? *If* "Yes" or "*No*" *provide details in* **Part VI.**

b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? *If "Yes," describe in* **Part VI** *the role played by the organization in this regard.*

 Yes
 No

 2a

 2a

 2b

 2b

 3a

 3b

 Schedule A (Form 990) 2022

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Part V Type III Non-Functionally Integrated 509(a)(3) Support	ing Organi	zations	
1 Check here if the organization satisfied the Integral Part Test as a qualify	ring trust on N	ov. 20, 1970 (<i>explain in</i>	Part VI). See instructions.
All other Type III non-functionally integrated supporting organizations mu	ist complete S	ections A through E.	
Section A - Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1 Net short-term capital gain	1		
2 Recoveries of prior-year distributions	2		
3 Other gross income (see instructions)	3		
4 Add lines 1 through 3.	4		
5 Depreciation and depletion	5		
6 Portion of operating expenses paid or incurred for production or			
collection of gross income or for management, conservation, or			
maintenance of property held for production of income (see instructions)	6		
7 Other expenses (see instructions)	7		
8 Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8		
Section B - Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1 Aggregate fair market value of all non-exempt-use assets (see			
instructions for short tax year or assets held for part of year):			
a Average monthly value of securities	1a		
b Average monthly cash balances	1b		
c Fair market value of other non-exempt-use assets	1c		
d Total (add lines 1a, 1b, and 1c)	1d		
e Discount claimed for blockage or other factors			
(explain in detail in Part VI):			
2 Acquisition indebtedness applicable to non-exempt-use assets	2		
3 Subtract line 2 from line 1d.	3		
4 Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount,			
see instructions).	4		
5 Net value of non-exempt-use assets (subtract line 4 from line 3)	5		
6 Multiply line 5 by 0.035.	6		
7 Recoveries of prior-year distributions	7		
8 Minimum Asset Amount (add line 7 to line 6)	8		
Section C - Distributable Amount			Current Year
1 Adjusted net income for prior year (from Section A, line 8, column A)	1		
2 Enter 0.85 of line 1.	2		
3 Minimum asset amount for prior year (from Section B, line 8, column A)	3		
4 Enter greater of line 2 or line 3.	4		
5 Income tax imposed in prior year	5		
6 Distributable Amount. Subtract line 5 from line 4, unless subject to			
emergency temporary reduction (see instructions).	6		
7 Check here if the current year is the organization's first as a non-function	ally integrated	I Type III supporting orga	nization (see

WELLESLEY COLLEGE

Check here if the current year i instructions).

Schedule A (Form 990) 2022

Schedule A (Form 990) 2022

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Schedule A (Form 990) 2022

WELLESLEY COLLEGE

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Par	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	inizations _{(continu}	Jed)	
Sect	ion D - Distributions				Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		1	
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported			
	organizations, in excess of income from activity			2	
3	Administrative expenses paid to accomplish exempt purpose	es of supported organizations	S	3	
4	Amounts paid to acquire exempt-use assets			4	
5	Qualified set-aside amounts (prior IRS approval required - prior	ovide details in Part VI)		5	
6	Other distributions (describe in Part VI). See instructions.			6	
7	Total annual distributions. Add lines 1 through 6.			7	
8	Distributions to attentive supported organizations to which the	he organization is responsive			
	(provide details in Part VI). See instructions.			8	
9	Distributable amount for 2022 from Section C, line 6			9	
10	Line 8 amount divided by line 9 amount			10	
Sect	ion E - Distribution Allocations (see instructions)	(i) Excess Distributions	(ii) Underdistributior Pre-2022	ıs	(iii) Distributable Amount for 2022
1	Distributable amount for 2022 from Section C, line 6				
2	Underdistributions, if any, for years prior to 2022 (reason-				
	able cause required - explain in Part VI). See instructions.				
3	Excess distributions carryover, if any, to 2022				
a	From 2017				
b	From 2018				
c	From 2019				
d	From 2020				
e	From 2021				
f	Total of lines 3a through 3e				
g	Applied to underdistributions of prior years				
h	Applied to 2022 distributable amount				
i	Carryover from 2017 not applied (see instructions)				
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.				
4	Distributions for 2022 from Section D,				
	line 7: \$				
a	Applied to underdistributions of prior years				
b	Applied to 2022 distributable amount				
c	Remainder. Subtract lines 4a and 4b from line 4.				
5	Remaining underdistributions for years prior to 2022, if				
	any. Subtract lines 3g and 4a from line 2. For result greater				
	than zero, explain in Part VI. See instructions.				
6	Remaining underdistributions for 2022. Subtract lines 3h				
	and 4b from line 1. For result greater than zero, explain in				
	Part VI. See instructions.				
7	Excess distributions carryover to 2023. Add lines 3j and 4c.				
8	Breakdown of line 7:				
	Excess from 2018				
	Excess from 2019				
	Excess from 2020				
	Excess from 2020				
	Excess from 2022				
-					

Schedule A (Form 990) 2022

WELLESLEY COLLEGE

Part VI Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

SCHEDULE A, PART II, LINE 10, EXPLANATION FOR OTHER INCOME:

Denilbolli A, TAM	TI, HIM IV, EXTERNATION FOR OTHER INCOME.
AUXILIARY ENTERE	PRISES
2018 AMOUNT: \$	4,241,133.
2019 AMOUNT: \$	4,970,992.
2020 AMOUNT: \$	3,078,229.
2021 AMOUNT: \$	2,641,956.
2022 AMOUNT: \$	3,739,264.
OTHER REVENUE	
2018 AMOUNT: \$	7,006,000.
2019 AMOUNT: \$	4,166,182.
2020 AMOUNT: \$	2,493,246.
2021 AMOUNT: \$	6,729,736.
2022 AMOUNT: \$	5,994,986.
WELLESLEY COLLEG	E CLUB
2018 AMOUNT: \$	405,534.
2019 AMOUNT: \$	235,547.
2020 AMOUNT: \$	4,258.

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Schedule A (Form 990) 2022

223451 11-15-22

Schedule B

(Form 990)

Department of the Treasury Internal Revenue Service

Name of the organization

Schedule of Contributors

Attach to Form 990 or Form 990-PF. Go to www.irs.gov/Form990 for the latest information. OMB No. 1545-0047

2022

Employer identification number

4-2103637

	WELLESLEY COLLEGE	04
Organization type (cheo	ck one):	
Filers of:	Section:	
Form 990 or 990-EZ	\fbox 501(c)(3) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	
	527 political organization	
Form 990-PF	501(c)(3) exempt private foundation	
	4947(a)(1) nonexempt charitable trust treated as a private foundation	
	501(c)(3) taxable private foundation	

Check if your organization is covered by the **General Rule** or a **Special Rule**. **Note:** Only a section 501(c)(7), (8), or (10) organization can check boxes for both the General Rule and a Special Rule. See instructions.

General Rule

For an organization filing Form 990, 990-EZ, or 990-PF that received, during the year, contributions totaling \$5,000 or more (in money or property) from any one contributor. Complete Parts I and II. See instructions for determining a contributor's total contributions.

Special Rules

X For an organization described in section 501(c)(3) filing Form 990 or 990-EZ that met the 33 1/3% support test of the regulations under sections 509(a)(1) and 170(b)(1)(A)(vi), that checked Schedule A (Form 990), Part II, line 13, 16a, or 16b, and that received from any one contributor, during the year, total contributions of the greater of (1) \$5,000; or (2) 2% of the amount on (i) Form 990, Part VIII, line 1h; or (ii) Form 990-EZ, line 1. Complete Parts I and II.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, total contributions of more than \$1,000 exclusively for religious, charitable, scientific, literary, or educational purposes, or for the prevention of cruelty to children or animals. Complete Parts I (entering "N/A" in column (b) instead of the contributor name and address), II, and III.

For an organization described in section 501(c)(7), (8), or (10) filing Form 990 or 990-EZ that received from any one contributor, during the year, contributions *exclusively* for religious, charitable, etc., purposes, but no such contributions totaled more than \$1,000. If this box is checked, enter here the total contributions that were received during the year for an *exclusively* religious, charitable, etc., purpose. Don't complete any of the parts unless the **General Rule** applies to this organization because it received *nonexclusively* religious, charitable, etc., contributions totaling \$5,000 or more during the year for an *exclusively* set.

Caution: An organization that isn't covered by the General Rule and/or the Special Rules doesn't file Schedule B (Form 990), but it **must** answer "No" on Part IV, line 2, of its Form 990; or check the box on line H of its Form 990-EZ or on its Form 990-PF, Part I, line 2, to certify that it doesn't meet the filing requirements of Schedule B (Form 990).

LHA For Paperwork Reduction Act Notice, see the instructions for Form 990, 990-EZ, or 990-PF.

Schedule B (Form 990) (2022)

WELLESLEY COLLEGE

Name of organization

Employer identification number

04-2103637

Part I Contributors (see instructions). Use duplicate copies of Part I if additional space is needed. (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 1 X Person Payroll 3,333,333. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Type of contribution No. Name, address, and ZIP + 4 **Total contributions** 2 X Person Payroll 2,600,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) Name, address, and ZIP + 4 **Total contributions** Type of contribution No. 3 X Person Payroll 2,000,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 4 X Person Payroll 2,000,000. Noncash \$ (Complete Part II for noncash contributions.) (a) (b) (c) (d) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 5 Person Payroll 1,750,000. Noncash X \$ (Complete Part II for noncash contributions.) (c) (d) (a) (b) No. Name, address, and ZIP + 4 **Total contributions** Type of contribution 6 X Person Payroll 1,274,364. Noncash \$ (Complete Part II for noncash contributions.) 223452 11-15-22

Schedule B (Form 990) (2022)

Name of organization

Employer identification number

WELLESLEY COLLEGE _

04-2103637

Part I	Contributors (see instructions). Use duplicate copies of Part I if addition	al space is needed.	
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
7		\$ <u>1,100,000.</u>	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
8_		\$1,000,000.	Person X Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II for noncash contributions.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Total contributions	(d) Type of contribution
		\$	Person Payroll Occupied Part II for noncash contributions.)

Schedule B (Form 990) (2022)

			Employer identification number	
WELLES Part II	SLEY COLLEGE Noncash Property (see instructions). Use duplicate copies of Part II if a	additional space is needed		-2103637
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.	9)	(d) Date received
5	SECURITIES	▲ 1 750 0	0.0	11/18/22
(a) No. from Part I	(b) Description of noncash property given	\$ 1,750,0 (c) FMV (or estimate (See instructions.	2)	(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions)		(d) Date received
		\$		
(a) No. from Part I	(b) Description of noncash property given	(c) FMV (or estimate (See instructions.		(d) Date received
		\$		

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Schedule B (Form 990) (2022)

Schedule	B (Form 990) (2022)		Page 4		
Name of o	organization		Employer identification number		
WELLE	SLEY COLLEGE		04-2103637		
Part III		through (e) and the following line entri- charitable, etc., contributions of \$1,000 or I	ction 501(c)(7), (8), or (10) that total more than \$1,000 for the year		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gif	t		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gif			
	Transferee's name, address, a	md ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
	(e) Transfer of gift				
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		
(a) No. from Part I	(b) Purpose of gift	(c) Use of gift	(d) Description of how gift is held		
		(e) Transfer of gif	t		
	Transferee's name, address, a	nd ZIP + 4	Relationship of transferor to transferee		

					OMD No. 1545 0047
			al Financial Statements		OMB No. 1545-0047
(Form 990)		Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.			2022
	ment of the Treasury I Revenue Service		ttach to Form 990. 0 for instructions and the latest information.		Open to Public Inspection
Name of the organization					identification number
	-	WELLESLEY COLLEGE		0	4-2103637
Par			d Funds or Other Similar Funds or Ac	counts.	Complete if the
	organization	n answered "Yes" on Form 990, Part IV, lin			
			(a) Donor advised funds (b) Funds and	d other accounts
1		nd of year			
2		contributions to (during year)			
3		grants from (during year)			
4		end of year			
5	-		writing that the assets held in donor advised fund exclusive legal control?		Yes No
6			dvisors in writing that grant funds can be used or		
0	•	e , , ,	r donor advisor, or for any other purpose conferri	2	
	impermissible priva			•	Yes No
Par			ganization answered "Yes" on Form 990, Part IV,		
1		ervation easements held by the organization			
	Preservation	of land for public use (for example, recreation	tion or education)	prically import	tant land area
		f natural habitat	Preservation of a certi	, i	
	Preservation	of open space			
2	Complete lines 2a	through 2d if the organization held a qualif	ied conservation contribution in the form of a cor	nservation ea	sement on the last
	day of the tax year	•		Held a	at the End of the Tax Year
а	Total number of co	nservation easements		2a	
b	Total acreage restr	icted by conservation easements		2b	
с	Number of conserv	vation easements on a certified historic stru	ucture included in (a)	2c	
d	Number of conserv	vation easements included in (c) acquired a	fter July 25,2006, and not on a		
				2d	
3	Number of conserv	vation easements modified, transferred, rele	eased, extinguished, or terminated by the organiz	zation during	the tax
	year	· · · · ·			
4		where property subject to conservation eas			
5		tion have a written policy regarding the per	h al da O		Yes No
6	•	provide the conservation easements it	handling of violations, and enforcing conservatio		
0		nours devoted to monitoring, inspecting,		in easements	during the year
7	Amount of expense	 es incurred in monitoring, inspecting, hand	ling of violations, and enforcing conservation eas	sements duri	ng the year
-					.g
8	Does each conserv	/ation easement reported on line 2(d) abov	e satisfy the requirements of section 170(h)(4)(B)((i)	
	and section 170(h)	(4)(B)(ii)?			Yes No
9			on easements in its revenue and expense statem		
	balance sheet, and	l include, if applicable, the text of the footn	ote to the organization's financial statements that	at describes t	he
	organization's acco	ounting for conservation easements.			
Pai		_	Art, Historical Treasures, or Other S	imilar Ass	ets.
		the organization answered "Yes" on Form			
1 a	•		8, not to report in its revenue statement and bala		orks
			lic exhibition, education, or research in furtheran	ice of public	
	· •		icial statements that describes these items.	abact	of
b	-	· ·	8, to report in its revenue statement and balance		
		· · · · ·	exhibition, education, or research in furtherance	soi public sei	vice,
		ng amounts relating to these items:		¢	
2			asures, or other similar assets for financial gain, p		
-	and organization	isserved of nois works of all, filstorical life	association on the association in anotal galli, p		

	the following amounts required to be reported under FASB ASC 958 relating to these items:		
а	Revenue included on Form 990, Part VIII, line 1	\$	
b	Assets included in Form 990, Part X	\$	
LHA	For Paperwork Reduction Act Notice, see the Instructions for Form 990.	Schedule D (Form 990) 2022	

232051 09-01-22

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued) 3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply): a X Public exhibition d X Loan or exchange program b X Scholarly research e Other	
 collection items (check all that apply): a X Public exhibition b X Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 	
 a X Public exhibition b X Scholarly research c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? 	
 b X Scholarly research e Other c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	
 c Preservation for future generations 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	
 4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII. 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	
 5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	
to be sold to raise funds rather than to be maintained as part of the organization's collection? Yes X Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes	
Part IV Escrow and Custodial Arrangements. Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes	
reported an amount on Form 990, Part X, line 21. 1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?	No
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X? Yes	
on Form 990, Part X?	
h If "Yes " explain the arrangement in Part XIII and complete the following table:	No
Amount	
c Beginning balance	
d Additions during the year 1d	
e Distributions during the year 1e	
f Ending balance 1 1 2 a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes	No
b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII	NU
Part V Endowment Funds. Complete if the organization answered "Yes" on Form 990, Part IV, line 10.	
(a) Current year (b) Prior year (c) Two years back (d) Three years back (e) Four years b	ack
1a Beginning of year balance 2,846,864,931. 3,236,785,461. 2,285,397,056. 2,173,415,000. 2,105,211,7	
b Contributions 43,749,570. 23,310,440. 21,401,639. 28,649,118. 25,614,1	
c Net investment earnings, gains, and losses 108,025,943306,875,113. 1,026,472,781. 176,478,722. 137,048,7	
d Grants or scholarships 53,816,843. 48,331,934. 44,409,376. 48,838,336. 46,965,4	
e Other expenditures for facilities	
and programs 55,954,050. 58,023,923. 52,076,639. 44,307,448. 47,494,2	19.
f Administrative expenses	
g End of year balance 2,888,869,551. 2,846,864,931. 3,236,785,461. 2,285,397,056. 2,173,415,0	00.
2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:	
a Board designated or quasi-endowment 29.7400 %	
b Permanent endowment 70.2600 %	
c Term endowment%	
The percentages on lines 2a, 2b, and 2c should equal 100%.	
3a Are there endowment funds not in the possession of the organization that are held and administered for the	
organization by:	No
	<u>X</u>
(*)	<u>X</u>
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?	
4 Describe in Part XIII the intended uses of the organization's endowment funds.	
Part VI Land, Buildings, and Equipment.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.	
Description of property(a) Cost or other(b) Cost or other(c) Accumulated(d) Book valuebasis (investment)basis (other)depreciation	
1a Land 36,565,222. 36,565,22	
b Buildings 886,434,788.386,047,799.500,386,98	9.
c Leasehold improvements	
d Equipment 16,155,805. 10,065,016. 6,090,78	
e Other	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.)	3.

Schedule D (Form 990) 2022

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Schedule D (Form 990) 2022 WELLESLEY COLLEGE

Part VII Investments - Other Securities.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives		
(2) Closely held equity interests		
(3) Other		
(A) PRIVATE EQUITY	1075658000.	END-OF-YEAR MARKET VALUE
(B) REAL ASSETS	173,111,000.	END-OF-YEAR MARKET VALUE
(C) ABSOLUTE RETURN	538,752,000.	END-OF-YEAR MARKET VALUE
(D) MISCELLANEOUS OTHER	75,197,047.	END-OF-YEAR MARKET VALUE
(E)		
(F)		
(G)		
(H)		
Total. (Col. (b) must equal Form 990, Part X, col. (B) line 12.)	1862718047.	

Part VIII Investments - Program Related.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total, (Col. (b) must equal Form 990, Part X, col. (B) line 13.)		

Part IX Other Assets.

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)	
Part X Other Liabilities.	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.	

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) GOVERNMENT LOAN ADVANCES	-302,963.
(3) ANNUITIES & UNITRUSTS PAYABLE	28,681,979.
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)	28,379,016.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII ... X

Schedule D (Form 990) 2022

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Sche	edule D (Form 990) 2022 WELLESLEY COLLEGE				2103637	Page 4
Pa	rt XI Reconciliation of Revenue per Audited Financial Stateme	nts Witl	h Revenue per F	leturn		
	Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.					
1	Total revenue, gains, and other support per audited financial statements			1	297,263	,214.
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:					
а	Net unrealized gains (losses) on investments	2a	-8,126,285	•	-	
b	Donated services and use of facilities	2b			-	
с	Recoveries of prior year grants				-	
d			9,846,616	•	-	
е	Add lines 2a through 2d			2e	1,720	
3	Subtract line 2e from line 1			3	295,542	,883.
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:					
а	Investment expenses not included on Form 990, Part VIII, line 7b	4a	12,903,714	•	-	
b	Other (Describe in Part XIII.)	4b	76,983,234	•	-	
с	Add lines 4a and 4b			4c	89,886	,948.
E				5	385,429	831
	I otal revenue. Add lines 3 and 4c. (This must equal Form 990. Part I. line 12.)			5	505,425	,051.
	Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12.) rt XII Reconciliation of Expenses per Audited Financial Stateme	ents Wi	th Expenses per	Retur	<u>505,425</u> n.	,051.
	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ents Wi	th Expenses per	Retur	'n.	,051.
	rt XII Reconciliation of Expenses per Audited Financial Stateme	ents Wi	th Expenses per	Retur	n.	
Pa	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.	ents Wi	th Expenses per	Retur	'n.	
Pa 1	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25:	ents Wi	th Expenses per	Retur	'n.	
Pa 1 2	Reconciliation of Expenses per Audited Financial Statemed Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements	ents Wi	th Expenses per	Retur	'n.	
Pa 1 2	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments	ents Wi	th Expenses per	Retur	'n.	
Pa 1 2	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities	ents Wi	th Expenses per	Retur	'n.	
Pa 1 2	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	ents Wi	th Expenses per		n. 250,844	<u>,056.</u> 0.
Pa 1 2 a b c d	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d	2a 2b 2c 2d	th Expenses per		'n.	<u>,056.</u> 0.
Pa 1 2 a b c d e	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.)	2a 2b 2c 2d	th Expenses per		n. 250,844	<u>,056.</u> 0.
Pa 1 2 b c d 3	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1	ents Wi	th Expenses per	• Retur	n. 250,844	<u>,056.</u> 0.
Pa 1 2 a b c d e 3 4	Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b	ents Wi	th Expenses per	• Retur	n. 250,844	<u>,056.</u> 0.
Pa 1 2 a b c d e 3 4	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1:	ents Wi	th Expenses per 12,903,714 76,983,234	• Retur	n. 250,844	<u>,056.</u> 0. ,056.
Pa 1 2 a b c d e 3 4	rt XII Reconciliation of Expenses per Audited Financial Stateme Complete if the organization answered "Yes" on Form 990, Part IV, line 12a. Total expenses and losses per audited financial statements Amounts included on line 1 but not on Form 990, Part IX, line 25: Donated services and use of facilities Prior year adjustments Other losses Other (Describe in Part XIII.) Add lines 2a through 2d Subtract line 2e from line 1 Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b Other (Describe in Part XIII.)	ents Wi	th Expenses per 12,903,714 76,983,234	Retur	n. 250,844 250,844	<u>,056.</u> 0. ,056.

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

PART III, LINE 1A:

FINANCIAL STATEMENT FOOTNOTE REGARDING ART COLLECTION

WELLESLEY COLLEGE DOES NOT REPORT AS REVENUE ANY GIFTS THAT ARE WORKS OF

ART. IN ADDITION, THE COLLEGE DOES NOT CAPITALIZE WORKS OF ART AS ASSETS

ON ITS BALANCE SHEET. THIS TREATMENT IS PERMITTED UNDER SFAS 116. THE

COLLEGE'S AUDITED FINANCIAL STATEMENTS DO NOT CONTAIN A FOOTNOTE REGARDING

WORKS OF ART, HISTORICAL TREASURE, OR OTHER SIMILAR ASSETS HELD FOR PUBLIC

33

EXHIBITION, EDUCATION OR RESEARCH IN FURTHERANCE OF PUBLIC SERVICE.

PART III, LINE 4:

DESCRIPTION OF ORGANIZATION'S COLLECTION

THE DAVIS MUSEUM AND CULTURAL CENTER HAS A PERMANENT COLLECTION OF

232054 09-01-22

Schedule D (Form 990) 2022

APPROXIMATELY 17,000 OBJECTS DATING FROM ANCIENT TIMES TO PRESENT DAY. INCLUDED ARE PAINTINGS, SCULPTURES, DECORATIVE OBJECTS, AND WORKS ON PAPER REPRESENTING CULTURES AROUND THE WORLD. THE COLLECTION OF THE MUSEUM SERVES AS A VALUED TEACHING RESOURCE FOR STUDENTS AND FACULTY IN MULTIPLE DISCIPLINES.

PROFESSORS FREQUENTLY ASSIGN STUDENTS TO SEE AND WRITE ABOUT PIECES BEING SHOWN IN THE MUSEUM; THE MUSEUM ALSO MAKES AVAILABLE WORKS FROM THE PERMANENT COLLECTION TO CLASSES MEETING IN THE MUSEUM. FUNDAMENTAL TO THE SPIRIT OF THESE EXERCISES IS THE STUDENTS' ENCOUNTERS WITH ORIGINAL WORKS OF ART.

PART V, LINE 4:

INTENDED USES OF ENDOWMENT FUNDS

THE WELLESLEY COLLEGE ENDOWMENT PROVIDES CRITICAL FUNDING THAT SUPPORTS

FINANCIAL AID AND FACULTY SALARIES, MAINTAINS AND EXPANDS FACILITIES, AND

UNDERWRITES NEW INITIATIVES AND PROGRAMS. THE ENDOWMENT HAS GROWN TO

PROVIDE APPROXIMATELY 40% OF OPERATING REVENUE. WELLESLEY COLLEGE'S STRONG

AND PRUDENT FINANCIAL MANAGEMENT ENSURES THE PURCHASING POWER OF THE

ENDOWMENT FOR GENERATIONS TO COME. THE TOP USES OF THE ENDOWMENT FOR

FY2023 WERE FINANCIAL AID AND FACULTY SALARIES.

PART X, LINE 2:

THE COLLEGE HAS NO MATERIAL UNCERTAIN TAX PROVISIONS AS OF JUNE 30, 2023 AND 2022.

PART XI, LINE 2D - OTHER ADJUSTMENTS:

UNREALIZED GAIN (LOSS) ON INTEREST RATE SWAP

3,133,266.

Schedule D (Form 990) 2022

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Schedule D (Form 990) 2022	WELLESLEY COLLEGE	04-2103637 Page 5
Part XIII Supplemental In	formation (continued)	
MINIMUM PENSION L	IABILITY	6,713,350.
TOTAL TO SCHEDULE	D, PART XI, LINE 2D	9,846,616.

PART XI, LINE 4B - OTHER ADJUSTMENTS:

FINANCIAL AID EXCLUDING PELL GRANTS

PART XII, LINE 4B - OTHER ADJUSTMENTS:

FINANCIAL AID EXCLUDING PELL GRANTS

76,983,234.

76,983,234.

PART V, LINE 2

WELLESLEY COLLEGE HAS ADOPTED ASU 2016-14, PRESENTATION OF THE FINANCIAL

STATEMENTS FOR NOT-FOR-PROFIT ENTITIES. AS A RESULT, THE JUNE 30, 2023

AUDITED FINANCIAL STATEMENTS CLASSIFY NET ASSETS AS EITHER NET ASSETS

WITHOUT DONOR RESTRICTIONS, OR NET ASSETS WITH DONOR RESTRICTIONS.

FOR PURPOSES OF SCHEDULE D, LINE 2, WELLESLEY COLLEGE HAS REPORTED ENDOWMENT FUNDS WITHOUT DONOR RESTRICTIONS AS BOARD DESIGNATED OR QUASI-ENDOWMENT AND ENDOWMENT FUNDS WITH DONOR RESTRICTIONS AS PERMANENT ENDOWMENT, RESPECTIVELY.

Schedule D (Form 990) 2022

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(Form 990)

Schools

OMB No. 1545-0047

Open to Public

2

Department of the Treasury Internal Revenue Service

Complete if the organization answered "Yes" on Form 990, Part IV, line 13, or Form 990-EZ, Part VI, line 48.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

WELLESLEY COLLEGE

Inspection Employer identification number

20

Name of the	organization

04-2103637

Pa	rt I			
			YES	NO
1	Does the organization have a racially nondiscriminatory policy toward students by statement in its charter,			
•	bylaws, other governing instrument, or in a resolution of its governing body?	1	х	
2	Does the organization include a statement of its racially nondiscriminatory policy toward students in all its brochures,			
-	catalogues, and other written communications with the public dealing with student admissions, programs, and scholarships?	2	x	
3	Has the organization publicized its racially nondiscriminatory policy on its primary publicly accessible Internet			
Ŭ	homepage at all times during its tax year in a manner reasonably expected to be noticed by visitors to the			
	homepage, or through newspaper or broadcast media during the period of solicitation for students, or during the			
	registration period if it has no solicitation program, in a way that makes the policy known to all parts of the general			
	community it serves? If "Yes," please describe. If "No," please explain. If you need more space, use Part II	3	x	
	ALL COLLEGE PUBLICATIONS, INCLUDING RECRUITMENT BROCHURES AND			
	CATALOGS, COURSE DESCRIPTION DOCUMENTS, THE COLLEGE'S			
	WEBSITE, AND FACULTY AND STUDENT HANDBOOKS, ETC. OUTLINE THE			
	INSTITUTION'S NONDISCRIMINATORY POLICY.			
4	Does the organization maintain the following?			
- -	Records indicating the racial composition of the student body, faculty, and administrative staff?	4a	x	
			X	
	Copies of all catalogues, brochures, announcements, and other written communications to the public dealing	40	21	<u> </u>
C		10	x	
ا م	with student admissions, programs, and scholarships?	4c 4d	X	<u> </u>
a	Copies of all material used by the organization or on its behalf to solicit contributions?	40		
b c d f g	Does the organization discriminate by race in any way with respect to: Students' rights or privileges? Admissions policies? Employment of faculty or administrative staff? Scholarships or other financial assistance? Educational policies? Use of facilities? Athletic programs? Other extracurricular activities? If you answered "Yes" to any of the above, please explain. If you need more space, use Part II.	5a 5b 5c 5d 5e 5f 5g 5h		X X X X X X X X
	Does the organization receive any financial aid or assistance from a governmental agency? Has the organization's right to such aid ever been revoked or suspended? If you answered "Yes" on either line 6a or line 6b, explain on Part II.	6a 6b	X	X
7	Does the organization certify that it has complied with the applicable requirements of sections 4.01 through			
'	4.05 of Rev. Proc. 75-50, 1975-2 C.B. 587, as modified by Rev. Proc. 2019-22, 2019-22 I.R.B. 1260, covering			
	racial nondiscrimination? If "No," explain on Part II	7	x	
			~ ~ ~	L

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule E (Form 990) 2022

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		edule E (Form 990) 202
IONAL OPPORTU		

WELLESLEY COLLEGE PARTICIPATES IN VARIOUS STUDENT FINANCIAL AID PROGRAMS

LINE 6 - EXPLANATION OF GOVERNMENT FINANCIAL AID:

Department of the Treasury			Open to Public			
Internal Revenue Service	Go to _W	ww.irs.gov/Forn	n990 for instructions and the latest i	information.		Inspection
Name of the organization					Employer	identification number
WELLESLEY COLL					04-21	
Part I General Inf	ormation on A	ctivities Out	side the United States. Compl	ete if the orgar	ization answ	vered "Yes" on
Form 990, Par						
-	-		ds to substantiate the amount of its gra			
the grantees' eligibility	for the grants or a	assistance, and	the selection criteria used to award the	grants or assis	stance?	X Yes No
2 For grantmakers. De United States.	scribe in Part V the	e organization's	procedures for monitoring the use of its	s grants and ot	her assistan	ce outside the
			an be duplicated if additional space is r	1		
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in the region	(d) Activities conducted in the region (by type) (such as, fundraising, pro- gram services, investments, grants to recipients located in the region)	is a pro describe	vity listed in gram service specific typ (s) in the reg	e, expenditures for and investments
CENTRAL AMERICA AND						
THE CARIBBEAN			PROGRAM SERVICES	STUDY AWAY	TUITION	43,350.
EAST ASIA AND THE						
PACIFIC			PROGRAM SERVICES	STUDY AWAY	TUITION	175,521.
EUROPE (INCLUDING						
ICELAND AND						
GREENLAND)	1	6	PROGRAM SERVICES	STUDY AWAY	TUITION	2,882,033.
MIDDLE EAST AND						
NORTH AFRICA			PROGRAM SERVICES	STUDY AWAY	TUITION	15,235.
NORTH AMERICA			PROGRAM SERVICES	STUDY AWAY	TUITION	47,421.
RUSSIA AND THE NEWLY						
INDEPENDENT STATES			PROGRAM SERVICES	STUDY AWAY	TUITION	12,750.
SOUTH AMERICA			PROGRAM SERVICES	STUDY AWAY	TUITION	89,032.
SOUTH ASIA			PROGRAM SERVICES	STUDY AWAY	TUITION	79,797.
3 a Subtotal		6				3,345,139.
b Total from continuation						672 00E 143
sheets to Part I	0	0				673,025,143.
c Totals (add lines 3a	1	6				676 370 282.

Statement of Activities Outside the United States

Complete if the organization answered "Yes" on Form 990, Part IV, line 14b, 15, or 16.

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2022

232071 10-17-22

17190509 153541 84190V

SCHEDULE F (Form 990) OMB No. 1545-0047

			• (Schedule F (Form 990), Part I, line (
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to	(e) If activity listed in (d) is a program service, describe specific type	(f) Total expenditures for region
		region	recipients located in the region)	of service(s) in region	
SUB-SAHARAN AFRICA			PROGRAM SERVICES	STUDY AWAY TUITION	48,927
ENTRAL AMERICA AND THE CARIBBEAN			PROGRAM SERVICES	STUDY AWAY PROGRAM	31,348
AST ASIA AND THE			PROGRAM SERVICES	STUDY AWAY PROGRAM	1,470
UROPE (INCLUDING					
GREENLAND)			PROGRAM SERVICES	STUDY AWAY PROGRAM	1,859,001
MIDDLE EAST AND					
NORTH AFRICA			PROGRAM SERVICES	STUDY AWAY PROGRAM	73,265
NORTH AMERICA			PROGRAM SERVICES	STUDY AWAY PROGRAM	21,324
SOUTH AMERICA			PROGRAM SERVICES	STUDY AWAY PROGRAM	105
OUTH AMERICA			FROGRAM SERVICES	STUDI AWAI PROGRAM	105
CENTRAL AMERICA AND THE CARIBBEAN			PROGRAM SERVICES	INTERNSHIPS	32,750
CAST ASIA AND THE			PROGRAM SERVICES	INTERNSHIPS	115,573
UROPE (INCLUDING CELAND AND					,
GREENLAND)			PROGRAM SERVICES	INTERNSHIPS	275,118

232181 04-01-22

			(Schedule F (Form 990), Part I, line 3		
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to	(e) If activity listed in (d) is a program service, describe specific type	(f) Total expenditures for region
		region	recipients located in the region)	of service(s) in region	
11DDLE EAST AND					
NORTH AFRICA			PROGRAM SERVICES	INTERNSHIPS	36,500
NORTH AMERICA			PROGRAM SERVICES	INTERNSHIPS	18,750
RUSSIA AND THE NEWLY					
INDEPENDENT STATES			PROGRAM SERVICES	INTERNSHIPS	5,000
SOUTH AMERICA			PROGRAM SERVICES	INTERNSHIPS	60,350
SOUTH ASIA			PROGRAM SERVICES	INTERNSHIPS	24,174
SUB-SAHARAN AFRICA			PROGRAM SERVICES	INTERNSHIPS	62,450
CENTRAL AMERICA AND FHE CARIBBEAN			PROGRAM SERVICES	FINANCIAL AID	266,285
					,
EAST ASIA AND THE PACIFIC			PROGRAM SERVICES	FINANCIAL AID	754,457
UROPE (INCLUDING					
GREENLAND)			PROGRAM SERVICES	FINANCIAL AID	579,346
MIDDLE EAST AND NORTH AFRICA			PROGRAM SERVICES	FINANCIAL ATD	202 11/
			INGIAN DERVICED	FINANCIAL AID	323,114

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17190509 153541 84190V

Schedule F (Form 990) Part I Continuatio	WELLESLE	Y COLLEG	E I• (Schedule F (Form 990), Part I, line 3	04-2103637 Page			
(a) Region	(b) Number of offices in the region	(c) Number of employees or agents in region	(d) Activities conducted in region (by type) (i.e., fundraising, program services, grants to recipients located in the region)	(e) If activity listed in (d) is a program service, describe specific type of service(s) in region	(f) Total expenditures for region		
NORTH AMERICA			PROGRAM SERVICES	FINANCIAL AID	793,224		
RUSSIA AND THE NEWLY INDEPENDENT STATES			PROGRAM SERVICES	FINANCIAL AID	642,353		
SOUTH AMERICA			PROGRAM SERVICES	FINANCIAL AID	856,532		
SOUTH ASIA			PROGRAM SERVICES	FINANCIAL AID	621,574		
SUB-SAHARAN AFRICA			PROGRAM SERVICES	FINANCIAL AID	1,706,831		
EAST ASIA AND THE PACIFIC			INVESTMENTS	INVESTMENTS	221,586,991		
EUROPE (INCLUDING ICELAND AND GREENLAND)			INVESTMENTS	INVESTMENTS	317,684,097		
MIDDLE EAST AND NORTH AFRICA			INVESTMENTS	INVESTMENTS	98,580,793		
NORTH AMERICA			INVESTMENTS	INVESTMENTS	25,963,441		
					-		
Totals	•				673,025,143		

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3 Enter total number of other organizations or entities

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of noncash assistance	(h) Description of noncash assistance	(i) Method of valuation (book, FMV, appraisal, other)
			ecognized as charities by the f					1
exempt 501(c)(3) orga	nization by the IRS, c	or for which the grantee of	or counsel has provided a sect	ion 501(c)(3) equ	ivalency letter	►		

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

Schedule F (Form 990) 2022

Page 2

Schedule F (Form 990) 2022

Part III	Grants and Other Assistanc	e to Individuals Outside	e the United Sta	tes. Complete i	if the organization ans	wered "Yes" or	n Form 990, Part	IV, line 16.
	Part III can be duplicated if a	dditional space is needed	ł.					

WELLESLEY COLLEGE

(a) Type of grant or assistance	(b) Region	(c) Number of recipients	(d) Amount of cash grant	(e) Manner of cash disbursement	(f) Amount of noncash assistance	(g) Description of noncash assistance	(h) Method of valuation (book, FMV, appraisal, other)
	CENTRAL AMERICA						
	AND THE CARIBBEAN						
	- ANTIGUA &						
FINANCIAL AID	BARBUDA, ARUBA,	3	266,285.	CR. TO ACCT.	0.		
	EAST ASIA AND THE						
	PACIFIC -						
	AUSTRALIA,						
FINANCIAL AID	BRUNEI, BURMA,	16	754,457.	CR. TO ACCT.	0.		
	EUROPE (INCLUDING						
	ICELAND &						
	GREENLAND) -						
FINANCIAL AID	ALBANIA, ANDORRA,	7	579,346.	CR. TO ACCT.	0.		
	MIDDLE EAST AND		,				
	NORTH AFRICA -						
	ALGERIA, BAHRAIN,						
FINANCIAL AID	DJIBOUTI, EGYPT,	4	323,114.	CR. TO ACCT.	0.		
	NORTH AMERICA -		,				
	CANADA AND						
	MEXICO, BUT NOT						
FINANCIAL AID	THE UNITED STATES	9	793,224.	CR. TO ACCT.	0.		
	RUSSIA AND						
	NEIGHBORING						
	STATES - ARMENIA,						
FINANCIAL AID	, AZERBIJAN,	8	642,353.	CR. TO ACCT.	0.		
	, SOUTH AMERICA -		,				
	ARGENTINA,						
	, BOLIVIA, BRAZIL,						
FINANCIAL AID	CHILE, COLUMBIA,	10	856,532.	CR. TO ACCT.	0.		
	SOUTH ASIA -		,				
	AFGHANISTAN,						
	, BANGLADESH,						
FINANCIAL AID	BHUTAN, INDIA,	8	621,574.	CR. TO ACCT.	0.		
	SUB-SAHARAN	-	_,	-			1
	AFRICA - ANGOLA,						
	BENIN, BOTSWANA,						
FINANCIAL AID	BURKINA FASO,	20	1706831.	CR. TO ACCT.	0.		

Schedule F (Form 990) 2022

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Schedule F (Form 990) 2022

1	Was the organization a U.S. transferor of property to a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Corporation (see Instructions for Form 926)</i>	X Yes	No
2	Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization may be required to separately file Form 3520, Annual Return To Report Transactions With Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A; don't file with Form 990)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect to Certain Foreign Corporations (see Instructions for Form 5471)</i>	X Yes	No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)</i>	X Yes	No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? <i>If</i> "Yes," <i>the organization may be required to file Form 8865, Return of U.S. Persons With Respect to Certain Foreign Partnerships (see Instructions for Form 8865)</i>	X Yes	No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? <i>If</i> "Yes," <i>the organization may be required to separately file Form 5713, International Boycott Report (see Instructions for Form 5713; don't file with Form 990)</i>	X Yes	No

Schedule F (Form 990) 2022

Schedule F (Form 990) 2022 WELLESLEY COLLEGE
Part V Supplemental Information

Provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method; amounts of investments vs. expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column (c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information. See instructions.

PART I, LINE 2:

MONITORING USE OF FUNDS

THE COLLEGE AWARDS AID TO MEET 100% OF A STUDENT'S DEMONSTRATED NEED. ALL

AID IS CREDITED TO THE STUDENT'S ACCOUNT. IF THE STUDENT WITHDRAWS FROM

WELLESLEY, THE AID IS ADJUSTED ACCORDINGLY. PAYMENTS IN CONNECTION WITH A

STUDY ABROAD PROGRAM ARE MADE WHILE THE STUDENT IS LIVING OUTSIDE THE

UNITED STATES. HOWEVER, AT THE TIME THE PAYMENT IS MADE, THE STUDENT IS A

RESIDENT OF THE UNITED STATES.

Schedule F (Form 990) 2022

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SCHEDULE I (Form 990)		Go	arants and Oth vernments, an	d Individua	ls in the Ŭni	ted States			3 No. 15	45-0047 77
		Comple	ete if the organization			rt IV, line 21 or 22.				
Department of the Treasury Internal Revenue Service				Attach to Forn						Public
			Go to www.irs	.gov/Form990 for	the latest information	ation.		1	nspec	
Name of the organization	WELLESLEY	COLLEGE						Employer identifi 0 4 -		n number 3637
Part I General Inform	nation on Grants a	nd Assistance								
1 Does the organization	n maintain records t	to substantiate the	amount of the grants	or assistance, the	grantees' eligibility	for the grants or assis	tance, and the selection			
criteria used to award	d the grants or assis	stance?						Хү	es	🗌 No
2 Describe in Part IV th	e organization's pro	ocedures for monite	oring the use of grant	funds in the United	States.					
			ations and Domestic be duplicated if addition			anization answered "Y	es" on Form 990, Part	t IV, line 21, for any		
.,	(f) Mathad of						(h) Purpos or assis			

2 Enter total number of section 501(c)(3) and government organizations listed in the line 1 table

3 Enter total number of other organizations listed in the line 1 table

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule I (Form 990) 2022

Schedule I (Form 990) 2022

WELLESLEY COLLEGE

Page 2

Part III Grants and Other Assistance to Domestic Individuals. Complete if the organization answered "Yes" on Form 990, Part IV, line 22. Part III can be duplicated if additional space is needed.

(a) Type of grant or assistance	(b) Number of recipients	(c) Amount of cash grant	(d) Amount of non- cash assistance	(e) Method of valuation (book, FMV, appraisal, other)	(f) Description of noncash assistance
'INANCIAL AID	1293	70,439,518.	0.		

Part IV Supplemental Information. Provide the information required in Part I, line 2; Part III, column (b); and any other additional information.

PART I, LINE 2:

MONITORING USE OF FUNDS

THE COLLEGE AWARDS AID TO MEET 100% OF A STUDENT'S DEMONSTRATED NEED. ALL

AID IS CREDITED TO THE STUDENT'S ACCOUNT. IF THE STUDENT WITHDRAWS FROM

WELLESLEY, THE AID IS ADJUSTED ACCORDINGLY. FOR INTERNSHIPS, THE COLLEGE IS

IN CONTACT WITH THE ORGANIZATIONS PROVIDING THE INTERNSHIP TO ENSURE THAT

HIGH-QUALITY PROGRAMS ARE PROVIDED TO THE STUDENTS.

SCHEDULE J	Compensation Information	1	OMB No. 1	545-004	47
(Form 990)	For certain Officers, Directors, Trustees, Key Employees, and Highest		20	99)
	Compensated Employees Complete if the organization answered "Yes" on Form 990, Part IV, line 23.		20	_ _	•
Department of the Treasury	Attach to Form 990.		Open to		ic
Internal Revenue Service	Go to www.irs.gov/Form990 for instructions and the latest information.		Inspe		
Name of the organiza		Employer id			nber
David L Ourset	WELLESLEY COLLEGE	04-2	10363	7	
Part I Questi	ons Regarding Compensation				
				Yes	No
	priate box(es) if the organization provided any of the following to or for a person listed on Form	990,			
	A, line 1a. Complete Part III to provide any relevant information regarding these items.				
	or charter travel				
X Travel for c					
	ification and gross-up payments rv spending account Health or social club dues or initiation fee X Personal services (such as maid, chauffe				
	ry spending account X Personal services (such as maid, chauffe	ur, chet)			
b If any of the bas	as an line to are sharked, did the examination follow a written policy recording as we are a				
•	es on line 1a are checked, did the organization follow a written policy regarding payment or		416	х	
	or provision of all of the expenses described above? If "No," complete Part III to explain		<u>1b</u>		
	tion require substantiation prior to reimbursing or allowing expenses incurred by all directors,			х	
trustees, and or	icers, including the CEO/Executive Director, regarding the items checked on line 1a?		2		
2 Indicate which	f any of the following the organization used to establish the compensation of the organization?	^			
	f any, of the following the organization used to establish the compensation of the organization's				
	Director. Check all that apply. Do not check any boxes for methods used by a related organizat nsation of the CEO/Executive Director, but explain in Part III.				
X Compensa					
	it compensation consultant X Compensation survey or study				
	f other organizations	Jommillee			
4 During the year,	did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing				
	related organization:				
•			4a	х	
					x
	reactive neumant from an aquity based companyation arrangement?		4.		X
-	f lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.				
Only section 50	1(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.				
-	d on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on			
contingent on th					
0	?		5a		X
b Any related orga	nization?				X
	a or 5b, describe in Part III.				
	d on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation	on			
	e net earnings of:				
•	?		6a	Х	
	nization?				X
	a or 6b, describe in Part III.				
	d on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	S			
	lines 5 and 6? If "Yes," describe in Part III		7	Х	
	its reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to t				
			8		X
	b, did the organization also follow the rebuttable presumption procedure described in				
	ion 53.4958-6(c)?		9		
	Reduction Act Notice, see the Instructions for Form 990.		ule J (Forn	n 990)	2022

232111 10-18-22

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Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

		(B) Breakdown of W	/-2 and/or 1099-MIS0 compensation	C and/or 1099-NEC	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation in column (B)
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation	compensation			reported as deferred on prior Form 990
(1) DEBORAH F. KUENSTNER	(i)	652,668.	528,728.	3,168.	32,025.	29,302.	1,245,891.	0.
CHIEF INVESTMENT OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(2) ROSE C. CARPENTER	(i)	490,568.	497,447.	480.	32,025.	27,809.	1,048,329.	0.
MANAGING DIRECTOR TO DEPUTY CIO	(ii)	0.	0.	0.	0.	0.	0.	0.
(3) RAY OQUENDO	(i)	442,850.	477,000.	1,987.	32,025.	28,674.	982,536.	0.
CHIEF OPERATING OFFICER	(ii)	0.	0.	0.	0.	0.	0.	0.
(4) PAULA A. JOHNSON	(i)	671,500.	0.	58,775.	32,025.	120,971.	883,271.	0.
PRESIDENT	(ii)	0.	0.	0.	0.	0.	0.	0.
(5) GREG ROZOLSKY	(i)	338,065.	305,419.	93.	32,025.	11,996.	687,598.	0.
INVESTMENT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(6) MATTHEW VEILLEUX	(i)	272,009.	271,002.	1,276.	31,650.	8,670.	584,607.	0.
INVESTMENT DIRECTOR	(ii)	0.	0.	0.	0.	0.	0.	0.
(7) ANDREW SHENNAN	(i)	340,702.	30,000.	2,364.	31,789.	99,264.	504,119.	0.
PROVOST AND DEAN OF COLLEGE	(ii)	0.	0.	0.	0.	0.	0.	0.
(8) PIPER ORTON	(i)	402,443.	0.	5,433.	32,025.	10,600.	450,501.	0.
VP FOR FIN. & ADMIN. & TREAS.	(ii)	0.	0.	0.	0.	0.	0.	0.
(9) KAREN PETRULAKIS	(i)	373,185.	0.	12,000.	32,025.	28,412.	445,622.	0.
GENERAL COUNSEL	(ii)	0.	0.	0.	0.	0.	0.	0.
(10) SHEILAH HORTON	(i)	274,417.	0.	1,837.	29,160.	90,468.	395,882.	0.
DEAN OF STUDENTS	(ii)	0.	0.	0.	0.	0.	0.	0.
(11) MARY CASEY	(i)	89,825.	0.	213,110.	12,911.	7,476.	323,322.	0.
VP FOR DEVELOPMENT & PUB. AFF.	(ii)	0.	0.	0.	0.	0.	0.	0.
(12) MEGAN NUNEZ	(i)	240,388.	0.	355.	26,056.	22,421.	289,220.	0.
DEAN OF FACULTY AFFAIRS	(ii)	0.	0.	0.	0.	0.	0.	0.
(13) MICHAEL JEFFRIES	(i)	232,262.	0.	229.	23,666.	22,399.	278,556.	0.
DEAN OF ACADEMIC AFF.	(ii)	0.	0.	0.	0.	0.	0.	0.
(14) ANN VELENCHIK	(i)	186,992.	0.	16,148.	22,024.	22,246.	247,410.	0.
FORMER DEAN OF ACADEMIC AFF.	(ii)	0.	0.	0.	0.	0.	0.	0.
(15) JOY ST. JOHN	(i)	96,142.	0.	31,410.	13,899.	12,159.	153,610.	0.
DEAN-ADMISS. & STU. FIN. SVCS	(ii)	0.	0.	0.	0.	0.	0.	0.
	(i)							
	(ii)							

Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

PART I, LINE 1A:

BENEFITS PROVIDED

WELLESLEY COLLEGE'S POLICY IS THAT THE COLLEGE WILL NOT PAY FOR OR

REIMBURSE THE TRAVEL, MEALS, OR EXPENSES OF THE SPOUSE/PARTNER OF AN

EMPLOYEE WITH THE EXCEPTION OF THE PRESIDENT. SPECIFICALLY, WHILE

PERFORMING HER OFFICIAL DUTIES IN THE AREA OF DEVELOPMENT, ALUMNAE

RELATIONS, AND OTHER BUSINESS OF THE COLLEGE, THE PRESIDENT MAY BE

ACCOMPANIED BY HER SPOUSE, WHO IS EXPECTED TO MAKE AN IMPORTANT

CONTRIBUTION TO ACHIEVING THE PURPOSES OF THE TRAVEL OR EVENTS. IN THOSE

CASES, THE COLLEGE'S POLICY IS TO AUTHORIZE THE PAYMENT OF ALL TRAVEL AND

RELATED EXPENSES OF THE PRESIDENT'S SPOUSE.

THE COLLEGE PROVIDES ON-CAMPUS HOUSING TO CERTAIN EMPLOYEES AS A CONDITION

OF EMPLOYMENT FOR THE CONVENIENCE AND BENEFIT OF THE COLLEGE. THE

PRESIDENT, PROVOST AND DEAN OF COLLEGE, AND VICE PRESIDENT AND DEAN OF

STUDENTS EACH RECEIVE HOUSING. THE AMOUNT OF THIS HOUSING IS NOT TAXABLE

AND IS NOT INCLUDED IN THEIR W-2. THE HOUSING REQUIREMENT AS A CONDITION OF

EMPLOYMENT IS DOCUMENTED IN THE EMPLOYEE'S FILES. THE COLLEGE WILL NOT PAY

FOR PERSONAL SERVICES WITH THE EXCEPTION OF THE PRESIDENT'S HOUSE. SINCE

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

THE PRESIDENT'S HOUSE IS USED EXTENSIVELY FOR COLLEGE BUSINESS,

HOUSEKEEPING SERVICES ARE PROVIDED FOR THE GENERAL SPACE. A CHEF WILL BE AT

THE PRESIDENT'S HOUSE TO PROVIDE MEALS FOR BUSINESS PURPOSE FUNCTIONS.

PERSONAL SERVICES PROVIDED TO EMPLOYEES AREAPPROPRIATELY REPORTED AS

TAXABLE COMPENSATION.

PART I, LINE 4A:

DURING THE TAX YEAR, MARY CASEY RECEIVED A SEVERANCE PAYMENT IN THE AMOUNT

OF \$181,938, WHICH IS REPORTED ON PART II, COLUMN B(III).

PART I, LINE 6:

PAYMENTS CONTINGENT OF NET EARNINGS

EMPLOYEES IN THE INVESTMENT OFFICE HAVE AN INCENTIVE PERFORMANCE-RELATED

BONUS SYSTEM BASED ON THE INVESTMENT PERFORMANCE OF THE WELLESLEY COLLEGE

ENDOWMENT. TOTAL COMPENSATION IS REVIEWED IN COMPARISON TO MARKET DATA

PROVIDED BY INDEPENDENT THIRD PARTIES.

PART I, LINE 7:

NONFIXED PAYMENTS

Schedule J (Form 990) 2022

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

EMPLOYEES OTHER THAN INVESTMENT OFFICE EMPLOYEES ARE ABLE TO RECEIVE

MERIT-BASED BONUS COMPENSATION.

Schedule J (Form 990) 2022

SCHEDULE K (Form 990) Supplemental Information on Tax-Exempt Bonds Department of the Treasury Internal Revenue Service Complete if the organization answered "Yes" on Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Part VI. Internal Revenue Service Attach to Form 990. Go to www.irs.gov/Form990 for instructions and the latest information.										OMB No. 154 202 Open to P Inspection			022 to Pub				
Name o	of the organization		SLEY CC	LLEGE										identif 103		n num	ıber
Part I	Bond Issues		SEI	E PART	VI	FOR COLUM	N (F) CON	TINUAT	IONS			_					
	(a) Issuer name (b) Issuer EIN (c) CUSIP #			(c) CUSIP #	(d) Date issued	(d) Date issued (e) Issue price		(f) Description of purpose		(g) Defeased (h) On of is			On behalf (i) Pooled f issuer financing				
												Yes	No	Yes	No	Yes	No
										CONSTRUC	FION -						
A MH	IEFA 2008	SERIES	I (04-210	3637	57586CP25	01/28/08	3 5738	5000.	REFINANC	ING 1999		X		х		х
										CONSTRUC	FION -						
в МІ	DEFA 2018	SERIES	ь (04-210	3637	57584YES4	03/01/18	3 10566	3450.	REFINANCING 1999			X		х		х
										CONSTRUC	FION -						
сMI	DEFA 2022	SERIES	м	04-210	3637	57584Y2L2	04/01/22	2 5086	2192.	REFINANC	ING 2012		X		х		х
D																	
Part II	Proceeds																
							4		В	С				D			
<u>1</u> A	mount of bonds r	retired							6,	890,000.							
2 A	mount of bonds l	egally defeased															
3 T	3 Total proceeds of issue					. 57,38	57,385,000.96,		500,000.	44,960,000		•					
4 0	Gross proceeds in	reserve funds															
5 C	apitalized interest	t from proceeds	s	<u></u>													
<u>6</u> P	Proceeds in refund	ling escrows		<u></u>													
_ 7 ls	suance costs from	m proceeds						530,057. 832,680.			491,488.						
8 C	redit enhanceme	nt from proceed	ls	<u></u>													
9 V	Vorking capital ex	penditures from	proceeds .														
10 C	apital expenditure	es from procee	ds	<u></u>							44,398,	,172	•				
<u>11</u> C	other spent procee	eds					. 31,40	31,407,943. 4,825,000.									
12 C	other unspent pro	ceeds															
13 Y	ear of substantial	completion						2010		2020	<u> </u>						
							Yes	No	Yes	No	Yes	No		Yes	\rightarrow	No	
	Vere the bonds iss	-	-		xempt b	oonds (or,			<u></u>								
	if issued prior to 2018, a current refunding issue)?					X	X		X				\rightarrow				
	Vere the bonds iss	-	-														
						<u></u>				X		Х	+		+		
	las the final alloca	•					Х		X		X		+		+		
	oes the organizat		lequate books	and record	s to su	pport the	37										
fi	final allocation of proceeds?					X		X		X							

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule K (Form 990) 2022

Schedule K (Form 990) 2022 WELLESLEY COLLEGE

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				2103037				i age
Part III Private Business Use		-						_
-		Α		B		C		D L
1 Was the organization a partner in a partnership, or a member of an LLC,	Yes	No	Yes	No	Yes	No	Yes	No
which owned property financed by tax-exempt bonds?		X		X		X		
2 Are there any lease arrangements that may result in private business use of								
bond-financed property?		X		X		X		
3a Are there any management or service contracts that may result in private								
business use of bond-financed property?	Х		Х		Х			
b If "Yes" to line 3a, does the organization routinely engage bond counsel or other outside								
counsel to review any management or service contracts relating to the financed property?	Х		Х		Х			
c Are there any research agreements that may result in private business use of								
bond-financed property?	Х			X		x		
d If "Yes" to line 3c, does the organization routinely engage bond counsel or other								
outside counsel to review any research agreements relating to the financed property?	Х							
4 Enter the percentage of financed property used in a private business use by entities								
other than a section 501(c)(3) organization or a state or local government		%		%		%		
5 Enter the percentage of financed property used in a private business use as a		,,,		,,,		,,,		
result of unrelated trade or business activity carried on by your organization,								
another section 501(c)(3) organization, or a state or local government		%		%		%		
		<u>%</u>						
		70 X		70 X		X		
7 Does the bond issue meet the private security or payment test?								
8a Has there been a sale or disposition of any of the bond-financed property to a non-		x		x		x		
governmental person other than a 501(c)(3) organization since the bonds were issued?		A						
b If "Yes" to line 8a, enter the percentage of bond-financed property sold or								
disposed of		%		%		%		1
c If "Yes" to line 8a, was any remedial action taken pursuant to Regulations								
sections 1.141-12 and 1.145-2?								
9 Has the organization established written procedures to ensure that all								
nonqualified bonds of the issue are remediated in accordance with the								
requirements under Regulations sections 1.141-12 and 1.145-2?	Х		Х		Х			
Part IV Arbitrage								
		A		B		;		<u>p</u>
1 Has the issuer filed Form 8038-T, Arbitrage Rebate, Yield Reduction and	Yes	No	Yes	No	Yes	No	Yes	No
Penalty in Lieu of Arbitrage Rebate?		X		X		X		
2 If "No" to line 1, did the following apply?								
a Rebate not due yet?	Х		Х		Х			
b Exception to rebate?		X		X		X		
c No rebate due?	Х		Х			X		
If "Yes" to line 2c, provide in Part VI the date the rebate computation was								
performed								
3 Is the bond issue a variable rate issue?	X		X			X		

232122 10-28-22

Schedule K (Form 990) 2022

WELLESLEY COLLEGE Schedule K (Form 990) 2022

04-2103637

Page 3

Part IV Arbitrage (continued)		^		В		2	-	`				
Ap Use the examination of the governmental issuer entered into a gualified		A No	Yes	B No	Yes		No Yes N X - X - X - X - X - D -) No				
4a Has the organization or the governmental issuer entered into a qualified hedge with respect to the bond issue?	Yes X		162	X	res		res	UN				
b Name of provider	JP MORGAN											
c Term of hedge		4400000										
d Was the hedge superintegrated?	0_0	X										
e Was the hedge terminated?		X										
5a Were gross proceeds invested in a guaranteed investment contract (GIC)?		X		x		x						
b Name of provider												
c Term of GIC												
d Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?												
6 Were any gross proceeds invested beyond an available temporary period?		X		X		x						
 7 Has the organization established written procedures to monitor the 												
requirements of section 148?	x		Х		x							
Part V Procedures To Undertake Corrective Action	1	11		1	I	l						
		4		В		2	D					
Has the organization established written procedures to ensure that violations	Yes	No	Yes	No	Yes	No	Yes	No				
of federal tax requirements are timely identified and corrected through the												
voluntary closing agreement program if self-remediation isn't available under												
applicable regulations?	x		Х		x							
Part VI Supplemental Information. Provide additional information for responses to questions	s on Schedule	K. See instru	ctions.	•	÷							
SCHEDULE K, PART I, BOND ISSUES:												
(A) ISSUER NAME: MHEFA 2008 SERIES I												
(F) DESCRIPTION OF PURPOSE: CONSTRUCTION - REFIN	NANCING	1999 I	SSUES									
(A) ISSUER NAME: MDEFA 2018 SERIES L												
(F) DESCRIPTION OF PURPOSE: CONSTRUCTION - REFIN	NANCING	1999 I	SSUES									
(A) ISSUER NAME: MDEFA 2022 SERIES M												
(F) DESCRIPTION OF PURPOSE: CONSTRUCTION - REFIN	NANCING	2012 I	SSUE									
SCHEDULE K, PART II, LINE 3:												
COLUMN B MHEFA 2008 SERIES L												
THE PROCEEDS OF THE BONDS ARE USED TO REFUND THE	OUTSTAL	NDING P	RINCIPA	AL								
MOUNT OF THE SERIES E BONDS.												
PRINCIPAL AMOUNT OF THE BONDS \$ 96,500,000												
NET ORIGINAL ISSUE PREMIUM \$ 9,163,450												
OTAL \$105,663,450												
COLUMN C MHEFA 2008 SERIES M												
THE PROCEEDS OF THE BONDS ARE USED TO REFUND THE	OUTSTAI	NDING P	RINCIPA	4L								
32123 10-28-22						Sc	hedule K (For	m 990) 202				
						• -						

Schedule K (Form 990) 2022		04-2103637	Page 4
	ion. Provide additional information for responses to question	ons on Schedule K. See instructions. (continued)	
AMOUNT OF THE SERI			
PRINCIPAL AMOUNT (
NET ORIGINAL ISSUE			
TOTAL \$ 50,6	82,192		
	II, LINES 3C AND 3D:		
COLUMN A - MHEFA 2			
	I AGREEMENTS THAT INVOLVE THE		
	LLEGE ROUTINELY ENGAGES BOND (
	CH AGREEMENTS RESULT IN PRIVA		
ON REVIEW, NO KNOW	N PRIVATE BUSINESS USE IS EVI	DENT.	
SCHEDULE K, PART 1	II, LINE 9:		
	ECTIONS 1.141-12 AND 1.145-2,	WELLESLEY COLLEGE HAS	
	IN PROCEDURES AS OF OCTOBER 3,		
SCHEDULE K, PART 1	V LINE 2:		
COLUMN A - MHEFA 2			
	LIES I BOND ISSUE REBATE CALCU	ATTON WAS PERFORMED	
FEBRUARY 3, 2023.			
COLUMN B - MDFA 20	19 GEDTEC I		
	CALCULATION FOR THE MDFA SERIE:		
AUGUST 2, 2022.	ALCOLATION FOR THE MDFA SERIE,	5 L BOND WAS PERFORMED	
· · · · · · · · · · · · · · · · · · ·	•		
COLUMN B - MDFA 20			
	BOND WAS ISSUED IN FEBRUARY 2	J22. THE REBATE IS NOT	
DUE YET.			

I

Transactions With Interested Persons

OMB No. 1545-0047

Name of the organization Employer identified WELLESLEY COLLEGE 04-210363 Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 1 (a) Name of disqualified person (b) Relationship between disqualified person and organization (c) Description of transaction			
Part I Excess Benefit Transactions (section 501(c)(3), section 501(c)(4), and section 501(c)(29) organizations only). Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. 1 (b) Relationship between disqualified	(d) Corre		
Complete if the organization answered "Yes" on Form 990, Part IV, line 25a or 25b, or Form 990-EZ, Part V, line 40b. (b) Relationship between disqualified (c) Description of the properties			
1 (b) Relationship between disqualified			
person and organization (c) becomption of italibation	Yes	<u>No</u>	
2 Enter the amount of tax incurred by the organization managers or disqualified persons during the year under			
section 4958\$			
3 Enter the amount of tax, if any, on line 2, above, reimbursed by the organization \$\$			
Part II Loans to and/or From Interested Persons.			
Complete if the organization answered "Yes" on Form 990-EZ, Part V, line 38a or Form 990, Part IV, line 26; or if the organi	ization		
reported an amount on Form 990, Part X, line 5, 6, or 22.	Zation		
(a) Name of (b) Palationship (c) Purpose (d) Lean to or (c) Original (f) Palance due (c) In (h) Appr	(h) Approved (i) Wr		
intervented neuronal limit or application of learning from the instrumentation of learning by DUdi	by board or committee?		
	No Yes	No	
ANDREW SHENNAN OFFICER MORTGAGE X 300,000. 300,000. X X	X	\perp	
		—	
		┼──	
		+	
		+	
		+	
		+	
Total\$ 300,000.			
Part III Grants or Assistance Benefiting Interested Persons.			
Complete if the organization answered "Yes" on Form 990, Part IV, line 27.			
	Purpose o ssistance	of	

(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of assistance	(d) Type of assistance	(e) Purpose of assistance

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule L (Form 990) 2022

232131 11-01-22

WELLESLEY COLLEGE

Part IV Business Transactions Involving Interested Persons. Complete if the organization answered "Yes" on Form 990, Part IV, line 28a, 28b, or 28c. (e) Sharing of (a) Name of interested person (b) Relationship between interested (c) Amount of (d) Description of organization's person and the organization transaction transaction revenues? Y<u>es</u> No Part V Supplemental Information. Provide additional information for responses to questions on Schedule L (see instructions). Schedule L (Form 990) 2022

232132 11-01-22

17190509 153541 84190V

SCHEDULE	Μ
(Form 990)	

Noncash Contributions

OMB No. 1545-0047

Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30								
Attach to Form 990.								
Go to www.irs.gov/Form990 for instructions and the latest information.								

Department of the Treasury Internal Revenue Service

0.	2022							
	Open to Public Inspection							
Employer identification number								

04-2103637

Name of the organization

WELLESLEY COLLEGE

Par	ιı	ן אין	pes of Prop	erty									
					(a) Check if	(b) Number of	(c) Noncash conti	ribution	Met	(d hod of d		ina	
				applicable	contributions or items contributed	amounts repo	rted on /III line 1a	noncash contribution amounts					
1	Art	- Works	s of art		X	3			FMV/\$0	FOR	TRA	CKIN	NG
2								-		-			
3													
4													
5				oods				0.	FMV/\$0	FOR	TRA	CKIN	NG
6													
7													
8													
9				d b		1	1,750	,000.	SELLINC	3 PRI	CE/I	FMV	
10	Sec	urities ·	Closely held st	tock									
11			Partnership, L										
	trus	t intere	sts										
12	Sec	urities ·	- Miscellaneous										
13	Qua	alified c	onservation cor	ntribution -									
14				ntribution - Other $_{\dots}$									
15													
16													
17						-						~	
18					4		0.	FMV/\$0	FOR	TRAC	CKIL	NG	
19													
20				es									
21													
22													
23													
24 05			OTHER -		x	1		0	FMV/\$0	FOD	עכש	ודשר	
25 26	Oth Oth	•		·		<u>+</u>		0.	<u>. шv/ 30</u>	FOR	INA	~~~	.10
26 27	Oth)									
27 28	Oth	```)									
<u>20</u> 29			Forms 8283 re	, ceived by the organ	ization during	the tax year for c	ontributions						
_0				completed Form 82	-			29				0	
					,,, _							Yes	No
30a	Dur	ing the	year, did the or	ganization receive b	by contributio	n any property rep	orted in Part I, line	es 1 throug	h 28, that it				
	mus	st hold i	for at least 3 ye	ears from the date of	f the initial co	ntribution, and whi	ch isn't required t	o be used	for				
			-	entire holding perioc			-				30a		X
b	exempt purposes for the entire holding period? b If "Yes," describe the arrangement in Part II.												
31	Doe	es the o	rganization hav	e a gift acceptance	policy that re	equires the review of	of any nonstandar	d contribut	ions?		31	Х	
32a	Doe	es the o	rganization hire	or use third parties	or related or	ganizations to solid	cit, process, or sel	l noncash					
	con	tributio	ns?								32a	Х	
b	lf "Y	/es," de	escribe in Part I	Ι.									
33	lf th	ie orgar	nization didn't re	eport an amount in	column (c) fo	r a type of property	r for which columr	n (a) is cheo	cked,				
	des	cribe in	Part II.										

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M (Form 990) 2022

232141 09-09-22

Schedule M (Form 990) 2022 WELLESLEY COLLEGE

Part II Supplemental Information. Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.

SCHEDULE M, PART I, COLUMN (B):

WELLESLEY COLLEGE REPORTS THE NUMBER OF CONTRIBUTIONS IN PART I, COLUMN

(B).

SCHEDULE M, LINE 32B:

USE OF THIRD PARTIES

WELLESLEY COLLEGE USES A SECURITIES BROKER TO SELL ALL DONATED PUBLICLY

TRADED SECURITIES. THE FEES CHARGED BY THE BROKER ARE AT FAIR MARKET

VALUE.

SCHEDULE M, PART I, LINE 33:

ACCOUNTING FOR WORKS OF ART

WELLESLEY COLLEGE DOES NOT REPORT AS REVENUE ANY GIFTS THAT ARE WORKS

OF ART. IN ADDITION, THE COLLEGE DOES NOT CAPITALIZE WORKS OF ART AS

ASSETS IN ITS BALANCE SHEET.

Schedule M (Form 990) 2022

232142 09-09-22

17190509 153541 84190V

SCHEDULE O (Form 990)

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information. Attach to Form 990 or Form 990-EZ. Go to www.irs.gov/Form990 for the latest information.



Employer identification number 04 - 2103637

WELLESLEY COLLEGE

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 REVIEW

FORM 990 WAS PREPARED BY AN OUTSIDE PUBLIC ACCOUNTING FIRM AND REVIEWED BY

THE COLLEGE'S FINANCE OFFICE. THE AUDIT COMMITTEE OF THE BOARD OF TRUSTEES

REVIEWS FORM 990 AND ALL REQUIRED SCHEDULES PRIOR TO FILING WITH THE

INTERNAL REVENUE SERVICE. FORM 990 AND ALL REQUIRED SCHEDULES ARE ALSO

DISTRIBUTED TO THE FULL BOARD OF TRUSTEES BEFORE FILING.

FORM 990, PART VI, SECTION B, LINE 11B:

FORM 990 PROVIDED TO GOVERNING BODY THE COLLEGE HAS DISTRIBUTED FORM 990 TO THE FULL BOARD OF TRUSTEES WITH THE EXCEPTION OF DONOR INFORMATION ON SCHEDULE B. BECAUSE OF SCHEDULE B'S PRIVATE AND CONFIDENTIAL NATURE, THE COLLEGE HAS CHOSEN NOT TO DISCLOSE THE IDENTITIES AND ADDRESSES OF ITS DONORS. AS SUCH, WE ARE REQUIRED TO ANSWER THE QUESTION ON LINE 11A "NO" EVEN THOUGH THE BOARD RECEIVES ALL OF FORM 990 EXCEPT FOR DONORS' NAMES AND ADDRESSES.

FORM 990, PART VI, SECTION B, LINE 12C: MONITORING AND ENFORCEMENT OF CONFLICT POLICY CONFLICT OF INTEREST POLICIES ARE IN PLACE FOR TRUSTEES, OFFICERS, EXTERNAL INVESTMENT COMMITTEE MEMBERS, AND ALL EMPLOYEES. TRUSTEES AND OFFICERS ARE REQUIRED TO DISCLOSE - AT LEAST AS OFTEN AS ANNUALLY AND WHENEVER Α POTENTIAL CONFLICT ISSUE ARISES - FINANCIAL OR PERSONAL INTERESTS WHICH MAY GIVE RISE TO CONFLICTS. THE CLERK OF THE BOARD OF TRUSTEES PROVIDES AN ANNUAL REPORT TO THE TRUSTEES SUMMARIZING THE CONFLICT OR POTENTIAL CONFLICTS ISSUES. AT LEAST ANNUALLY, THE TRUSTEES REVIEW THE COLLEGE'S LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990) 2022 232211 10-28-22

Name of the organization	Employer identification number
WELLESLEY COLLEGE	04-2103637
RELATIONSHIPS WITH SIGNIFICANT VENDORS OR SERVICE PROVIDE	RS SERVING THE
COLLEGE TO ASSURE THAT SUCH RELATIONSHIPS ARE IN THE BEST	INTEREST OF THE
COLLEGE AND ARE OTHERWISE CONSISTENT WITH THE TERMS OF TH	E CONFLICT OF

INTEREST POLICY.

FORM 990, PART VI, SECTION B, LINE 15:

COMPENSATION REVIEW AND APPROVAL

THE COMPENSATION OF THE PRESIDENT AND OTHER OFFICERS OF THE COLLEGE IS DETERMINED BY THE TALENT AND COMPENSATION COMMITTEE, A SUBCOMMITTEE OF THE BOARD OF TRUSTEES. THE TALENT AND COMPENSATION COMMITTEE OF THE BOARD OF TRUSTEES UTILIZES INDEPENDENT EXTERNAL CONSULTANTS TO ASSIST WITH BOTH THE REVIEW OF COMPENSATION GUIDELINES AND THE GATHERING OF COMPARABILITY DATA IN DETERMINING THE REASONABLENESS OF COMPENSATION AND COMPLIANCE WITH THE PROCEDURES DESCRIBED IN TREASURY REGULATION SECTION 53.4958-6, INCLUDING CONTEMPERANEOUS DOCUMENTATION OF COMPENSATION DECISIONS. KEY EMPLOYEES ARE COMPENSATED BASED UPON THE GUIDELINES THE COLLEGE HAS FOR ADMINISTRATIVE AND FACULTY EMPLOYEES. THESE GUIDELINES INCLUDE REVIEW OF THE MARKET BY LOOKING AT SALARIES FOR COMPARABLE POSITIONS AS WELL AS A MERIT PROGRAM BASED ON PERFORMANCE. COMPENSATION DECISIONS ARE MADE BY PERSONS WHO ARE INDEPENDENT OF THE EMPLOYEES FOR WHOM THE COMPENSATION IS BEING DETERMINED.

FORM 990, PART VI, SECTION C, LINE 19:

AVAILABILITY OF DOCUMENTS

A COPY OF THE BUSINESS CONDUCT POLICY WHICH INCLUDES THE CONFLICT OF INTEREST POLICY IS GIVEN TO ALL NEW EMPLOYEES UPON HIRE. BOTH THE BUSINESS CONDUCT POLICY AND THE FINANCIAL STATEMENTS ARE AVAILABLE ON THE COLLEGE'S WEBSITE. THE COLLEGE'S ORGANIZING DOCUMENTS ARE AVAILABLE UPON REQUEST.

232212 10-28-22

Schedule O (Form 990) 2022 Name of the organization WELLESLEY COLLEGE	Page 2 Employer identification number 04-2103637
FORM 990, PART XI, LINE 9, CHANGES IN NET ASSETS:	
UNREALIZED GAIN (LOSS) ON INTEREST RATE SWAP	3,133,266.
MINIMUM PENSION LIABILITY	6,713,350.
TOTAL TO FORM 990, PART XI, LINE 9	9,846,616.
232212 10-28-22 63	Schedule O (Form 990) 2022

SCHEDULE R

(Form 990)

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

Attach to Form 990.

OMB No. 1545-0047

2022 Open to Public Inspection

Employer identification number 04 - 2103637

Department of the Treasury Internal Revenue Service

Go to www.irs.gov/Form990 for instructions and the latest information.

Name of the organization

WELLESLEY COLLEGE

Part I Identification of Disregarded Entities. Complete if the organization answered "Yes" on Form 990, Part IV, line 33.

(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
WELLESLEY COLLEGE FOUNDATION UK LIMITED -					
98-1196154, 19 NORCOTT ROAD, LONDON, UNITED					
KINGDOM N16 7EJ	EDUCATION	UNITED KINGDOM	-383.	16,479.	WELLESLEY

Part II Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt organizations during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section	(f) Direct controlling entity		g) 512(b)(13) rolled ity?
				501(c)(3))		Yes	No
	-						

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule R (Form 990) 2022

Schedule R (Form 990) 2022 WELLESLEY COLLEGE

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year.

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(1	h)	(i)	(j)	(k)
Name, address, and EIN of related organization	Primary activity	Legal domicile (state or foreign	Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections 512-514)	Share of total income	Share of end-of-year assets		ortionate tions?			or Percentage ownership
		country)		sections 512-514)		400010	Yes	No	K-1 (Form 1065)	Yes	10
	-										
	-										
	-										
	1										
	1										
	{										
	4										

Part IV Identification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	512(t contr ent	tity?
POOLED INCOME FUNDS (5)	SUPPORT	MA		TRUST				X	No
CHARITABLE REMAINDER TRUSTS (2)	SUPPORT	MA		TRUST				x	
	-								
	-								

Schedule R (Form 990) 2022 WELLESLEY COLLEGE

Part V Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36.

ote: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule.		Yes	5 N
During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		
b Gift, grant, or capital contribution to related organization(s)			
c Gift, grant, or capital contribution from related organization(s)			
d Loans or loan guarantees to or for related organization(s)			
e Loans or loan guarantees by related organization(s)			T
f Dividends from related organization(s)	1f		-
g Sale of assets to related organization(s)			
Purchase of assets from related organization(s)			
Exchange of assets with related organization(s)			
Lease of facilities, equipment, or other assets to related organization(s)			+
Lease of facilities, equipment, or other assets from related organization(s)	<u>1k</u>		
Performance of services or membership or fundraising solicitations for related organization(s)			
n Performance of services or membership or fundraising solicitations by related organization(s)			
Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n		
Sharing of paid employees with related organization(s)			+
Reimbursement paid to related organization(s) for expenses	1 p		
Reimbursement paid by related organization(s) for expenses			╉
Other transfer of cash or property to related organization(s)	1r		
s Other transfer of cash or property from related organization(s)	1s	X	

(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved
(1) POOLED INCOME FUNDS (5)	S	130,435.	ACCRUAL
(2) CHARITABLE REMAINDER TRUSTS (2)	S	213,055.	ACCRUAL
(3)			
<u>(4)</u>			
(5)			
<u>(6)</u>			

Schedule R (Form 990) 2022 WELLESLEY COLLEGE

Part VI Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

(a) Name, address, and EIN of entity	(b) Primary activity	(c)	(d) Predominant income (related, unrelated, excluded from tax under sections 512-514)	Are partne 501(org	e all rs sec. c)(3) s.?	(f) Share of total	(g) Share of end-of-year	(† Dispr tior alloca	n) opor- nate tions?	(i) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) Genera manag partn	(k) ^{Il or} Percentage ^{ing} ownership
		country)	sections 512-514)	Yes			assets	Yes	No	(Form 1065)	Yes	10

Schedule R (Form 990) 2022

WELLESLEY COLLEGE

Part VII Supplemental Information

Provide additional information for responses to questions on Schedule R. See instructions.

Schedule R (Form 990) 2022

232165 09-14-22